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Debtor 1 Kimberly First Name	L	Johnson	Case number (if known)	
	Middle Name Questions for Reporting Purp	Last Name	The state of the s	
Part 6: Answer These (Questions for Reporting Purp 16a. Are your debts prima 101(8) as "incurred by No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primal obtain money for a bus investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts	rily consumer debts an individual primaril rily business debts?	y for a personal, fam ? Business debts are or through the operat	oily, or household purpose." debts that you incurred to tion of the business or
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	Yes. I am filing under Chapter 7 paid that funds will be ava No. Yes.		any exempt property is exured creditors?	xcluded and administrative expenses are
18. How many creditors do you estimate that you owe?	☑ 1-49 □ 50-99 □ 100-199 □ 200-999	1,000-5,000 5,001-10,00 10,001-25,0	00	25,001-50,000 50,001-100,000 More than 100,000
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$50,000,00°	\$10 million 1-\$50 million 1-\$100 million 01-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20. How much do you estimate your liabilities to be?	☑ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million	\$50,000,001	\$10 million -\$50 million -\$100 million 1-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Pari7A Sign Below		***************************************		
	If I have chosen to file under (11,12, or 13 of title 11, United choose to proceed under Chap If no attorney represents me a me fill out this document, I have I request relief in accordance of I understand making a false structure of Jacobson (18 U.S.C. §§ 18 Jacobson (18 U.S.C.)	Chapter 7, I am aware States Code. I undersoter 7. and I did not pay or agree obtained and read with the chapter of title atement, concealing passe can result in fine	e that I may proceed stand the relief availars are to pay someone the notice required to 11, United States (property, or obtaining as up to \$250,000, or	able under each chapter, and I who is not an attorney to help by 11 U.S.C. § 342(b). Code, specified in this petition. g money or property by fraud in imprisonment for up to 20
	Executed on 9/13/2016 MM / DD /	/ YYYY	Executed on _	MM / DD / YYYY

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F500710000000000000000000000000000000000					
Fill in this info	ormation to identify your case	ĝi.			
Debtor 1	Kimberly		Johnson	November 1990	
	First Name	Middle Name	Last Name		
Debtor 2	in a l	***************************************			
(Spouse, ii iii	ing) First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	Northern	District of Illinois		
Case number	r		(State)		
(If known)	***************************************			was a second	
Official	Form 106De	C			c if this is ar ded filing
Declara	ation About ar	n Individual De	ebtor's Sched	ules	12/1
		r, both are equally respons			
§§ 152, 1341, 1	io to, and oor i.	MODERNITE TO COMPANY AND	en rosum mines up to pa	250,000, or imprisonment for up to 20 years, or both.	18 U.S.C.
Did you	pay or agree to pay some	one who is NOT an attorne	y to help you fill out bankr	uptcy forms?	
✓ No					
Yes.	Name of person		Attach Bankruptcy Pe Signature (Official Fo.	etition Preparer's Notice, Declaration, and rm 119).	
Isl Kimb Signature	erly Johnson Correct. of Debtor 1	that I have read the summ	★ Signature c		
Date 9/13	3/2016 4/DD/VVVV		Date	The state of the s	

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	Kimberly	L_	Johnson	Case number (if known)	
	First Name	Middle Name	Last Name	- Control of the cont	****
28. Wi	thin 2 years before you ditors, or other parties	ı filed for bankruptcy, dic s.	l you give a financial staten	ent to anyone about your business? Include all financial institu	tions,
Engineer Comments	No Yes. Fill in the details b	elow.			
			Date issued		
	Name		· MM/DD/YYYY	_	
	Number Street				
	City	State Zip Code			
Part 12:	Sign Below	,			
	ruptcy case can result			ents, and I declare under penalty of perjury that the answers are rty, or obtaining money or property by fraud in connection with years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.	
	~~~~~	erly Johnson (LIWW)	4 FOLLMOUY	×	a
	/s/ Kimb Signature o	V W	J. Polludar J	Signature of Debtor 2	а
	/s/ Kimp	f Debtor 1	J. FOLLAZIY)		a
Z N	Signature o  Date 9/13/	f Debtor 1 2016	of Financial Affairs for Indiv	Signature of Debtor 2	a
Y Y	Signature o  Date 9/13/ pu attach additional pa	f Debtor 1 2016 ages to Your Statement o		Signature of Debtor 2  Date  iduals Filing for Bankruptcy (Official Form 107)?	a
Y	Signature of Date 9/13/ ou attach additional parts to es ou pay or agree to pay	f Debtor 1 2016 ages to Your Statement o	of Financial Affairs for Indiversely	Signature of Debtor 2  Date  iduals Filing for Bankruptcy (Official Form 107)?	a

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Debtor	Kimberly	L	Johnson	Case number (if
1	First Name	Middle Name	Last Name	known)
ist You	r Unexpired Perso	nal Property Leases		Part 2
For any i	unexpired personal pro ion below. Do not list r	operty lease that you listed in	leases are leases that are	Contracts and Unexpired Leases (Official Form 106G), fill in the still in effect; the lease period has not yet ended. You may assume 65(p)(2).
Desc	cribe your unexpired po	ersonal property leases		Will the lease be assumed?
Less	or's name:			No Yes
Desc prope	ription of leased erty:			
				No.
Lesso	or's name:			No Yes
Desc prope	ription of leased erty:			
1.000	or's name:			No
LGSSC	or straine.			Yes
Desc prope	ription of leased			
	······································			
Lesso	or's name:			Secretary No.
Desc prope	ription of leased			Yes
		*		Special
Lesso	or's name:			e No Service Yes
Desci	ription of leased			les les
p. opo				
Lesso	or's name:			No No
				Yes Yes
Descr prope	ription of leased rty:			
				generatio
Lesso	or's name:			No general Yes
Descr proper	ription of leased rty:			5
arkan S	ign Below	Elisatuvan propriori		
Under proper	penalty of perjury, I de ty that is subject to an	clare that I have indicated m	y intention about any pro	perty of my estate that secures a debt and any personal
	Kimberly Johnson nature of Debtor 1	Central Johnson	) X Signa	ture of Debtor 1
	e 9/13/2016	- 1971 -	Date	

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#### UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Johnson, Kimberly L	
	Debtor(s)	Case No.
		Chapter. Chapter7
	VERIFIC	ATION OF CREDITOR MATRIX
	The above named Debtors hereby verify the	at the attached list of creditors is true and correct to the best of their knowledge.
Date:	9/13/2016	Johnson, Kimberly L Signature of Debtor

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Debtor 1	Kimberly First Name	L Middle Name	Johnson	Case numbe	er (if known)	
		wade Natie	Last Name	Column A Debtor 1	Column B Debtor 2 o	r
Do no	nployment compensation ot enter the amount if you confe locial Security Act. Instead, lis	end that the amount receit t it here:	ved was a benefit under	\$0.00	non-filing	spouse
For y			\$0.00			
9.Pensi	ion or retirement income. D fit under the Social Security Ac	o not include any amount	\$0.00 received that was a	\$0.00	_	
10. <b>Inco</b> amou paym intern	me from all other sources in the not include any benefits ents received as a victim of a valid and or domestic terrorism, and put the total below.	not listed above. Specify received under the Social	al Security Act or			
Total a	amounts from separate pages	if any.		+\$0.00		
11. Calc	culate your total current mo umn. Then add the total for Col	n <b>thly income.</b> Add lines lumn A to the total for Col	2 through 10 for each umn B.	\$ <u>2,112.32</u>	+	\$2,112.32
	Determine Whether th					Total current monthly income
	tlate your current monthly in Copy your total current monthly		ow these steps:			
	Multiply by 12 (the number of n				Copy line 11 here →	\$2.112.32 V 13
	he result is your annual incom					X 12 12b. <u>\$25,347.84</u>
13 Calcul	ate the median family incor	ne that applies to you.	Follow these steps:			**************************************
Fill in t	he state in which you live.		Illinois	•		
Fill in t	he number of people in your h	ousehold.	2			
Fill in the	he median family income for yo nold.	our state and size of				13. \$63,896.00
113000	a list of applicable median inc tions for this form. This list may to the lines compare?	ome amounts, go online also be available at the	using the link specified in bankruptcy clerk's office.	n the separate		
14a. 🔀	Line 12b is less than or equ Go to Part 3.	al to line 13. On the top o	f page 1, check box 1, T	here is no presumption of	fabuse.	
14b.	Line 12b is more than line 13 Go to Part 3 and fill out Forr	3. On the top of page 1, c n 122A-2.	heck box 2, The presum	ption of abuse is determin	ned by Form 122A-2.	
ari 3: S	Sign Below					
By sig	ning here, I declare under pen	alty of perjury that the info	ormation on this stateme	nt and in any attachment	s is true and correct	
	17.	, , , ,	0	in and in any anadisticing	a is true and conject.	
	s/ Kimberly Johnson KW gnature of Debtor 1	word Frank	^{∦)} - <b>×</b> _5	ignature of Debtor 2	The state of the s	******
Da	te 9/13/2016	_				
	MM/DD/YYYY		L.	Pate 9/13/2016 MM/DD/YYYY		
If you	u checked line 14a, do NOT fil	l out or file Form 122A-2.				

If you checked line 14a, do NOT fill out or file Form 122A-2. If you checked line 14b, fill out Form 122A-2 and file it with this form.

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B 203 (12/94)

#### UNITED STATES BANKRUPTCY COURT

#### Northern District of Illinois

In re	Kimberly L Johnson	in bistrict of inmols	
-	Debtor	Case No.	
		Chapter	(If known)
	DISCLOSURE OF COMPENS	· · · · · · · · · · · · · · · · · · ·	Chapter 7
,	DISCLOSURE OF COMPENS	SATION OF ATTORNEY FOR	DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2 that compensation paid to me within one year before services rendered or to be rendered on behalf of the is as follows:	1016(b), I certify that I am the attorney for the a e the filing of the petition in bankruptcy, or agre e debtor(s) in contemplation of or in connection	abovenamed debtor(s) and eed to be paid to me, for w ith the bankruptcy case
	For legal services, I have agreed to accept		\$1,350.0
	Prior to the filing of this statement I have received		
	Balance Due		\$0.0
2.	The source of the compensation paid to me was:		\$1,350.00
	productives .	er (specify)	
3.	The source of the compensation paid to me is:		
	✓ Debtor Othe	er (specify)	
4.	I have not agreed to share the above-disclosed of members and associates of my law firm.	compensation with any other person unless the	y are
	I have agreed to share the above-disclosed comp members or associates of my law firm. A copy of the people sharing in the compensation, is attach	II IDA agreement togother with a list -/ ii -	re not mes of
5.	In return for the above-disclosed fee, I have agreed to a. Analysis of the debtor's financial situation, and bankruptcy;	to render legal service for all aspects of the ba I rendering advice to the debtor in determining	nkruptcy case, including: whether to file a petition in
	b. Preparation and filing of any petition, schedule	es, statements of affairs and plan which may b	e required;
	<ul> <li>Representation of the debtor at the meeting of</li> </ul>	creditors and confirmation hearing, and any ac	dourned hearings thereof:
6. I	By agreement with the debtor(s), the above-disclosed		C marcon,
		ERTIFICATION	
I c of the	certify that the foregoing is a complete statement of a debtor(s) in this bankruptcy proceedings.	iny agreement or arrangement for payment to	me for representation
***************************************	9/13/2016	/s/ Mike Miller	Management of the state of the
	Date	Signature of Attorney	
		Semrad Law Firm	
		Name of law firm	



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# CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$ 1350.00 attorney fees plus any necessary post-petition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr. Adding additional bills \$30.00 Motion to Reopen and Avoid Lien \$1000.00

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

- 1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments; or
- 2. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

Kimberly	Johnson
Client ID	

Quoitial: H

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I further understand that the fee to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Date: 09/13/2016

Client LAWW JAWW Client

Attorney Ran P. Cook

Kimberly Johnson Client ID

Initial:

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
, ,		
Northern District of: Illinois (State)	<del></del>	
Case number (if known)	Chapter you are filing under:	
	✓ Chapter 7	
	Chapter 11	
	Chapter 12	Check
	Chapter 13	amend

#### Official Form 101

#### Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself		
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1. Your full name	Kimberly	
NAC to all and a to	First name	First name
Write the name that is on your government-issued	L Middle name	Middle name
picture identification (for example, your driver's	Johnson	Middle Hame
license or passport	Last name	Last name
Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2. All other names you		
have used in the	First name	First name
last 8 years	Middle name	Middle name
Include your married or	Middle name	Middle name
maiden names.	Last name	Last name
	First name	First name
	Middle name	Middle name
	Last name	Last name
3. Only the last 4 digits of your	XXX - XX- 4230	xxx - xx-
Social Security number or federal	OR	OR
Individual Taxpayer Identification	9 xx - xx-	9 xx - xx-
number (ITIN)		

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	Debtor 1 Kimberly	Case number (if known)	L Johnson
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years  Include trade names and doing business as names  EIN  EIN  EIN  5. Where you live  8136 Saginaw Ave., 2nd Floor Number Street  Chicago Illinois 60617 City State Zip Code  Cook County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.  512 Dorchester Dr	First Name		Middle Name Last Name
and Employer Identification Numbers (EIN) you have used in the last 8 years  Include trade names and doing business as names  EIN  EIN  EIN  EIN  5. Where you live  8136 Saginaw Ave., 2nd Floor Number Street  Chicago Illinois 60617 City State Zip Code  Cook County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.  512 Dorchester Dr		About Debtor 2 (Spouse Only in a Joint Case):	About Debtor 1:
Numbers (EIN) you have used in the last 8 years  Include trade names and doing business as names  EIN  EIN  EIN  5. Where you live  ### A Staginaw Ave., 2nd Floor Number Street    Chicago   Illinois   60617     City   State   Zip Code     Cook     County     If your mailling address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.    512 Dorchester Dr     Business name     City     City   State   Zip Code     County     If Debtor 2 lives at a different address:     City   State   Zip Code     County     If Debtor 2's mailing address is different from yours, fill if in here. Note that the court will send any notices to this mailing address.   Site   Description     County     County	and Employer	I have not used any business names or EINs.	I have not used any business names or EINs.
Business name   Business nam	Numbers (EIN) you	Business name	Business name
doing business as names  EIN  EIN  EIN  5. Where you live  8136 Saginaw Ave., 2nd Floor Number Street  Chicago Illinois 60617 City State Zip Code  Cook County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.  512 Dorchester Dr	last 8 years	Business name	Business name
5. Where you live  8136 Saginaw Ave., 2nd Floor Number Street  Chicago Illinois 60617 City State Zip Code  Cook County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.  512 Dorchester Dr  If Debtor 2 lives at a different address:  Number Street  City State Zip Code  City State Zip Code  County  If Debtor 2 lives at a different address:  Number Street  City State Zip Code  City State Zip Code  County  If Debtor 2's mailing address is different from yours, fill in here. Note that the court will send any notices to this mailing address.		- EIN	EIN
8136 Saginaw Ave., 2nd Floor Number Street  Chicago Illinois 60617 City State Zip Code  Cook County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.  512 Dorchester Dr		EIN	EIN
Number Street    Chicago   Illinois   60617	5. Where you live	If Debtor 2 lives at a different address:	
Number Street    Chicago   Illinois   60617			8136 Saginaw Ave., 2nd Floor
City State Zip Code  Cook County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.  512 Dorchester Dr  City State Zip Code  County  If Debtor 2's mailing address is different from yours, fill in here. Note that the court will send any notices to this mailing address.		Number Street	-
City State Zip Code  Cook County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.  512 Dorchester Dr  City State Zip Code  County  If Debtor 2's mailing address is different from yours, fill in here. Note that the court will send any notices to this mailing address.		_	
City State Zip Code  Cook County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.  512 Dorchester Dr  City State Zip Code  County  If Debtor 2's mailing address is different from yours, fill in here. Note that the court will send any notices to this mailing address.			
County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.  512 Dorchester Dr  County  If Debtor 2's mailing address is different from yours, fill in here. Note that the court will send any notices to this mailing address.		_	
County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.  512 Dorchester Dr  County  If Debtor 2's mailing address is different from yours, fill in here. Note that the court will send any notices to this mailing address.		City State Zip Code	City State Zip Code
County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.  512 Dorchester Dr  County  If Debtor 2's mailing address is different from yours, fill in here. Note that the court will send any notices to this mailing address.			Cook
If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.  512 Dorchester Dr		County	
fill it in here. Note that the court will send any notices to you at this mailing address.  in here. Note that the court will send any notices to this mailing address.			·
this mailing address.  512 Dorchester Dr			
512 Dorchester Dr		3	
		auuress.	
Number Street Number Street  —————————————————————————————————			
		Number Street	Number Street
Christiana Tennessee 37037		_	
City State Zip Code City State Zip Code		City State Zip Code	City State Zip Code
6. Why you are Check one: Check one:		Check one:	Check one:
choosing this district to file for bankruptcy  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	district to file for		
	bankiuptoy		_
		_	
		_	
		-	

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Debtor 1 Kimberly		number (if known)
Part 2: Tell the Court Al	Middle Name Last Name  About Your Bankruptcy Case	
7. The chapter of the Bankruptcy Code you are choosing to file under	Check one. (For a brief description of each, see Notice Required by 11 B2010)). Also, go to the top of page 1 and check the appropriate box.	U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form
8. How you will pay the fee	<ul> <li>✓ I will pay the entire fee when I file my petition. Ple court for more details about how you may pay. Typics may pay with cash, cashier's check, or money order on your behalf, your attorney may pay with a credit case.</li> <li>✓ I need to pay the fee in installments. If you choose Individuals to Pay Your Filing Fee in Installments (Office By law, a judge may, but is not required to, waive you less than 150% of the official poverty line that applied the fee in installments). If you choose this option, you Chapter 7 Filing Fee Waived (Official Form 103B) and</li> </ul>	ally, if you are paying the fee yourself, you If your attorney is submitting your payment ard or check with a pre-printed address.  e this option, sign and attach the <i>Application for</i> cial Form 103A).  this option only if you are filing for Chapter 7. ur fee, and may do so only if your income is s to your family size and you are unable to pay ou must fill out the <i>Application to Have the</i>
9. Have you filed for bankruptcy within the last 8 years?	District        When          MM           District        When	Case number  / DD / YYYYY  Case number  / DD / YYYYY  Case number
10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	Yes. Debtor  District  Debtor  District  Debtor  District  When  When	Relationship to you  Case number, if known  / DD / YYYYY  Relationship to you  Case number, if known  / DD / YYYYY
11. Do you rent your residence?	<ul> <li>✓ No. Go to line 12.</li> <li>✓ Yes. Has your landlord obtained an eviction judgment against you at the proof of the second of the second</li></ul>	

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Debtor 1 Kimberly		L		Johnson	Case number (if known)		
First Name				Last Name			
Part 3: Report About An	y Bus	sinesse	es You Own as a S	ole Proprietor			
12. Are you a sole proprietor of any full- or part-time business?  A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.  If you have more than one sole		No. Yes.	Go to Part 4.  Name and location of b  Name of business, if an  Number  City  Check the appropriate	Street	State r business:	Zip Code	- - -
proprietorship, use a separate sheet and attach it to this petition.			Health Care Bu Single Asset Re Stockbroker (as	siness (as defined in eal Estate (as defined defined in 11 U.S.C. ker (as defined in 11	11 U.S.C. § 101(27A)) d in 11 U.S.C. § 101(51B)) § 101(53A))		
13. Are you filing under  Chapter 11 of the Bankruptcy Code and are you a small business debtor?  If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set approduced deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the product of the product				recent balance sheet, statement	of		
For a definition of small business debtor, see 11 U.S.C. § 101(51D).		No. No. Yes.	Bankruptcy Code.	er 11, but I am NOT	a small business debtor accord	ding to the definition in the other than the other than the definition in the Bankruptcy	/ Code.
Part 4: Report if You Ow	n or	Have A	ny Hazardous Pro	operty or Any P	roperty That Needs Imi	mediate Attention	
14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard	✓ □	No. Yes.	What is the hazard?				
to public health or safety? Or do you own any property that needs immediate attention?		,	Where is the property?	Number	Street		
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?				City	State	Zip Code	

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#### First Name Middle Name Last Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed about credit this bankruptcy petition, and I received a certificate of this bankruptcy petition, and I received a certificate of counseling. completion. completion. Attach a copy of the certificate and the payment plan, if any, Attach a copy of the certificate and the payment plan, if any, The law requires that that you developed with the agency. that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed counseling before this bankruptcy petition, but I do not have a this bankruptcy petition, but I do not have a you file for certificate of completion. certificate of completion. bankruptcy. You must truthfully check Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment one of the following you MUST file a copy of the certificate and payment plan, if any. plan, if any. choices. If you cannot do so, you are I certify that I asked for credit counseling services I certify that I asked for credit counseling services not eligible to file. from an approved agency, but was unable to obtain from an approved agency, but was unable to obtain those services during the 7 days after I made my those services during the 7 days after I made my If you file anyway, request, and exigent circumstances merit a 30-day request, and exigent circumstances merit a 30-day temporary waiver of the requirement. temporary waiver of the requirement. the court can dismiss your case, you will To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the requirement, lose whatever filing attach a separate sheet explaining what efforts you made to attach a separate sheet explaining what efforts you made to fee you paid, and obtain the briefing, why you were unable to obtain it before obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances you filed for bankruptcy, and what exigent circumstances your creditors can required you to file this case. required you to file this case. begin collection activities again. Your case may be dismissed if the court is dissatisfied with Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for your reasons for not receiving a briefing before you filed for bankruptcy. bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, the payment plan you developed, if any. If you do not do so, your case may be dismissed. your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:		
Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions	

about finances. Disability. My physical disability causes me to be unable to participate in a briefing in

person, by phone, or through the internet, even after I reasonably tried

to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

counseling because or:					
Incapacity.	I have a mental illness or a mental				

I am not required to receive a briefing about credit

Any extension of the 30-day deadline is granted only for

cause and is limited to a maximum of 15 days.

deficiency that makes me incapable of realizing or making rational decisions about finances.

My physical disability causes me to be unable to participate in a briefing in

person, by phone, or through the internet, even after I reasonably tried to do so.

Disability.

Active duty. I am currently on active military duty in

a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1 Kimberly		Johnson Case number (if know	<u>(n)</u>		
Part 6: Answer These Qu	Middle Name uestions for Reporting Purpo	Last Name SeS			
16. What kind of debts do you have?	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."  No. Go to line 16b.  Yes. Go to line 17.  16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.  No. Go to line 16c.  Yes. Go to line 17.  16c. State the type of debts you owe that are not consumer debts or business debts.				
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	paid that funds will be availa  No.  Yes.	er 7. Go to line 18.  Do you estimate that after any exempt property is able to distribute to unsecured creditors?	s excluded and administrative expenses are		
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,000 5,001-10,000 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000		
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
Part 7: Sign Below					
For you	and correct.  If I have chosen to file under (11,12, or 13 of title 11, United choose to proceed under Chap If no attorney represents me ame fill out this document, I had I request relief in accordance I understand making a false st	and I did not pay or agree to pay some ve obtained and read the notice requirement, the chapter of title 11, United Statatement, concealing property, or obtacase can result in fines up to \$250,00 52, 1341, 1519, and 3571.	ceed, if eligible, under Chapter 7, available under each chapter, and I eone who is not an attorney to help red by 11 U.S.C. § 342(b). Ites Code, specified in this petition. An aining money or property by fraud in 10, or imprisonment for up to 20		

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Debtor 1 Kimberly	L	Johnson	Case number	(if known)
First Name	Middle Name	Last Name		
For your attorney, if you are represented by one  If you are not represented by an attorney, you do not	eligibility to proceed ur the relief available und to the debtor(s) the no	nder Chapter 7, 11, 1 der each chapter for tice required by 11 U	2, or 13 of title 11, l which the person is .S.C. § 342(b) and,	that I have informed the debtor(s) about United States Code, and have explained eligible. I also certify that I have delivered in a case in which § 707(b)(4)(D) applies, nation in the schedules filed with the
need to file this page.	/s/ Mike Miller		Date	9/13/2016
. •	Signature of Attorney	for Debtor		MM / DD / YYYY
	Mike Miller Printed name  Semrad Law Firm Firm name  20 S. Clark Street Street 28th Floor			
	Chicago		Illinois	60603
	City		State	Zip Code
	Contact phone	3122844902	Email address	
			Illir	nois
	Bar number		Sta	ate

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Fill in this information to identify your case:					
Debtor 1	Kimberly	L	Johnson		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		Northern	District of Illinois (State)		
Case number (If known)			(State)		

Check if this is an
amended filing

12/15

#### Official Form 106Sum

#### **Summary of Your Assets and Liabilities and Certain Statistical Information**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets	
	<b>Your assets</b> Value of what you own
1. Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$5,360.00
1c. Copy line 63, Total of all property on Schedule A/B	\$5,360.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
<ol> <li>Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)</li> <li>Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D</li> </ol>	\$0.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$7,751.47
Your total liabilities	\$7,751.47
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I)  Copy your combined monthly income from line 12 of Schedule I	\$1,694.25
Schedule J: Your Expenses (Official Form 106J)  Copy your monthly expenses from line 22, Column A, of Schedule J	\$1,760.00

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Deb	otor 1 Kimberly	L	Johnson	Case number (if known)		
	First Name	Middle Name	Last Name			
Part	4: Answer These Q	luestions for Administr	ative and Statistical Red	cords		_
6. <b>A</b>	are you filing for bankrup	tcy under Chapters 7, 11, or	13?			
- 1	No. You have nothing to	o report on this part of the form.	Check this box and submit this	form to the court with your other schedules.		
i	✓ Yes.			,		
	103.					
7. <b>V</b>	Vhat kind of debt do you	ı have?				
			ner debts are those incurred by out lines 8-10 for statistical purp	an individual primarily for a personal, ooses. 28 U.S.C. § 159.		
		rimarily consumer debts. You ith your other schedules.	u have nothing to report on this p	part of the form. Check this box and submit		
		Your Current Monthly Incom Form 122B Line 11; OR, Form	ne: Copy your total current montl 122C-1 Line 14.	hly income from Official	\$2,112.32	
9.	Copy the following spe	cial categories of claims fror	m Part 4, line 6 of Schedule E	/F:		
	From Part 4 on Schedu	le E/F, copy the following:		Total claim		
	9a. Domestic support obli	igations (Copy line 6a.)		\$0.00		
	9b. Taxes and certain other	er debts you owe the governme	nt. (Copy line 6b.)	\$0.00		
	9c. Claims for death or pe	ersonal injury while you were int	oxicated. (Copy line 6c.)	\$0.00		
	9d. Student loans. (Copy	line 6f.)		\$0.00		
	9e. Obligations arising ou priority claims. (Copy line	, ,	divorce that you did not report a	\$0.00		
	9f. Debts to pension or pr	rofit-sharing plans, and other si	milar debts. (Copy line 6h.)	\$0.00		
	On <b>Total</b> Add lines 9a th	urough Of		\$0.00		

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Fill in this	information to identify	your case:		
Debtor 1	Kimberly	L	Johnson	
	First Name	Middle	Name Last Name	
Debtor 2 (Spouse,	if filing) First Name	Middle	Name Last Name	
United St	ates Bankruptcy Cour	for the: Northern	District of Illinois	
Case nur	mhar		(State)	
(If known)				
Officia	al Form 106	A/B		Check if this is an amended filing
Sche	dule A/B: F	Property		12/1
category responsik write your Part 1:	where you think it fit ble for supplying con name and case nun Describe Each F	s best. Be as complete a rect information. If more nber (if known). Answer e Residence, Building	st an asset only once. If an asset fits in more the nd accurate as possible. If two married people is space is needed, attach a separate sheet to the every question.  Land, or Other Real Estate You Own in any residence, building, land, or similar proping.	are filing together, both are equally nis form. On the top of any additional pages, or Have an Interest In
<b>✓</b>	No. Go to Part 2			
	Yes. Where is the pro-	operty?		
1.1			What is the property? Check all that apply.  Single-family home	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D:
	Street address, if available, or othe	ailable, or other description	Duplex or multi-unit building	Creditors Who Have Claims Secured by Property.
			Condominium or cooperative  Manufactured or mobile home	Current value of the entire property? Current value of the portion you own?
			Land	<del></del>
	Number Street		Investment property	Describe the nature of your ownership interest (such as fee simple, tenancy by
	City S	itate Zip Code	_ Timeshare Other	the entireties, or a life estate), if known.
			Who has an interest in the property? Checkone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Check if this is community property (see instructions)
			Other information you wish to add about th property identification number:	is item, such as local
If you	own or have more that	n one, list here:	property identification number.	
4.0			What is the property? Check all that apply.	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D:
1.2	Street address, if av	ailable, or other description	Single-family home Duplex or multi-unit building	Creditors Who Have Claims Secured by Property.
			Condominium or cooperative	Current value of the entire property? Current value of the portion you own?
			Manufactured or mobile home	
	Number Street		Land Investment property	Describe the nature of your ownership
	City	toto Zin Codo	Timeshare Other	interest (such as fee simple, tenancy by the entireties, or a life estate), if known.
	City S	tate Zip Code	Who has an interest in the property? Checkone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Check if this is community property (see instructions)
			At least one of the debtors and another	

Other information you wish to add about this item, such as local property identification number:

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Debto	or 1 Kimberly L First Name Middle Name	Johnson Case numbe	(if known)	
1.3	Street address, if available, or other description	What is the property? Check all that apply.  Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home		on <i>Schedule D:</i>
	Number Street  City State Zip Code	Land Investment property Timeshare Other Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Describe the nature of your over interest (such as fee simple, to the entireties, or a life estate),  Check if this is community (see instructions)	enancy by if known.
		Debtor 1 and Debtor 2 only  At least one of the debtors and another  Other information you wish to add about this item property identification number:  r all of your entries from Part 1, including any entries are.	s for pages	
you ow	u own, lease, or have legal or equitable interes	et in any vehicles, whether they are registered or not also report it on Schedule G: Executory Contracts and Un rcycles		
. 6				
;	Yes  3.1 Make  Model:  Year:	Who has an interest in the property? Check one.  Debtor 1 only	Do not deduct secured claims or the amount of any secured claims Creditors Who Have Claims Sec	s on <i>Schedule D:</i>
	Approximate mileage:  Other information:	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see		nt value of the n you own? 
;	Make Model: Year: Approximate mileage: Other information:	instructions)  Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another		s on <i>Schedule D:</i>
		Check if this is community property (see instructions)		

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Debtor 1	Kimberly First Name	L Middle Name	Johnson Last Name	Case number	(if known)	
3.3	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the proone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this is community instructions)	d another	the amount of any secur	claims or exemptions. Put ed claims on Schedule D: eaims Secured by Property.  Current value of the portion you own?
		•	Who has an interest in the proone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this is community instructions)	d another property (see icles, and acces	the amount of any secur Creditors Who Have Cl Current value of the entire property?  sories	claims or exemptions. Put ed claims on Schedule D: aims Secured by Property.  Current value of the portion you own?
	mples: Boats, trailers, motors, _l No Yes	personal watercraft,	fishing vessels, snowmobiles, moto	orcycle accessorie	is	
4.1	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the proone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this is community instructions)	d another	the amount of any secur	claims or exemptions. Put ed claims on Schedule D: aims Secured by Property.  Current value of the portion you own?
4.2	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the proone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this is community	d another	the amount of any secur	claims or exemptions. Put ed claims on Schedule D: eaims Secured by Property.  Current value of the portion you own?
		-	instructions) of your entries from Part 2, incl			

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D	ebtor 1			L	Johnson	Case number (if known)	
		First Name		Middle Name	Last Name		
Pa	art 3:	Describe	Your Personal a	nd Household It	ems		
D	ο γοι	ı own or h	ave any legal o	r equitable intere	est in any of the fo	ollowing items?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
	Examp		s and furnishings bliances, furniture, lin	ens, china, kitchenwar	е		
	No Yes. I	Describe	Used Furniture				\$900.00
	<b>'. Elect</b> Examp		ns and radios; audio,	video, stereo, and digit	al equipment; computer	s, printers, scanners; music	
	No		,	3		.,,	
✓	Yes. I	Describe	Used Electronics (c	ellphone, 2 tv, tablet)			\$850.00
1 -		•	and figurines; paintir	• .	vork; books, pictures, or ctions, memorabilia, coll	•	
✓	No						
	Yes. [	Describe					
	-	les: Sports, p	ports and hobbies hotographic, exercise ks; carpentry tools; m		pment; bicycles, pool tal	bles, golf clubs, skis; canoes	
<b>✓</b>	No						
	Yes. [	Describe					] <del></del>
			fles, shotguns, ammu	unition, and related equ	ipment		
	No I vaa r	Dagarib a					٦
Н	res. i	Describe					
			clothes, furs, leather	coats, designer wear,	shoes, accessories		
붜	No Vaar	Dogorih o	Lie al Olathia				٦
	res. i	Describe	Used Clothing				\$350.00
	2. Jew Examp			elry, engagement rings	, wedding rings, heirlooi	m jewelry, watches, gems,	
✓		Describe	misc Jewelry				\$100.00
	-	n-farm anima bles: Dogs, ca	<b>Is</b> ts, birds, horses				
		Describe					] <del></del>
1	4. Any	other perso	nal and household	items you did not alr	eady list, including an	y health aids you did not list	
✓	No						
	Yes. [	Describe					
			-		cluding any entries for	r pages you have attached	\$2200.00

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Der	Tiret Name	Middle Name	JOHNSON	Case number (# known)	
Part	First Name  A: Describe Your	Financial Assets	Last Name		
		any legal or equitable int	erest in any of the follo	wing?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
	✓ No	ve in your wallet, in your home, in a			
17.	Deposits of money Examples: Checking, s	avings, or other financial accounts stitutions. If you have multiple acco	; certificates of deposit; shares ir		
	✓ Yes		Institution name:		
		17.1. Checking account:	Royal Savings Bank		\$1000.00
		17.2. Checking account:			
		17.3. Savings account:	Royal Bank		\$100.00
		17.4. Savings account:			
		17.5. Certificates of deposit:			
		17.6. Other financial account:	Green Dot Debit card		\$60.00
		17.7. Other financial account:			
		17.8. Other financial account:			
		17.9. Other financial account:			
18.		, or publicly traded stocks			
	No No	investment accounts with brokerag	e lims, money market accounts		
	Yes	Institution or issuer name:			
					-
19.	Non-publicly traded s an LLC, partnership,		ated and unincorporated busi	nesses, including an interest in	_
	Yes. Give specific information about them	Name of entity		% of ownership:	

Official Form 106A/B Schedule A/B: Property page 5

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Deb	tor 1	Kimberly	L	Johnson	Case number (if known)	
		First Name	Middle Name	Last Name		
20.	Neg	otiable instruments ir i-negotiable instrume	orate bonds and other negotian clude personal checks, cashiers ints are those you cannot transfer	checks, promissory notes, a	and money orders.	
		Yes. Give specific information about them	Issuer name:			
						_
21.		irement or pension mples: Interests in IR		), thrift savings accounts, or	other pension or profit-sharing plans	_
		No Yes. List each	Type of account:	Institution name:		
		account	401(k) or similar plan:	With Employer		\$2000.00
		separately.	Pension plan:			
			IRA:			
			Retirement account:			
			Keogh:			
			Additional account:			
			Additional account:			
22.	You Exa		orepayments deposits you have made so that you with landlords, prepaid rent, publi			
	<b>✓</b>	No		Institution name:		
	Ш	Yes	Electric:			_
			Gas:			
			Heating oil:	-		_
			Security deposit on rental unit:	-		_
			Prepaid rent:			_
			Telephone:			_
			Water:			
			Rented furniture:			_
			Other:			_
23.		•	a periodic payment of money to	you, either for life or for a nur	nber of years)	
		No Yes	Issuer name and description:			
						_

Official Form 106A/B Schedule A/B: Property page 6

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Debt	or 1 Kimberly First Name	L Middle I	Johnson Name Last Name	Case number (if known)	
24.	Interests in a	n education IRA, in an acc	ount in a qualified ABLE program, or under	r a qualified state tuition program	
	26 U.S.C. §§ 5	30(b)(1), 529A(b), and 529(b	o)(1).		
	✓ No Yes	Institution name and descript	tion. Separately file the records of any interests.	11 U.S.C. § 521(c):	
25.		able or future interests in por your benefit	property (other than anything listed in line 1	1), and rights or powers	
	<b>✓</b> No				7
	Yes. Desc	ribe			
26.	Patents conv	vrights trademarks trades	secrets, and other intellectual property		
20.			s, proceeds from royalties and licensing agreem	nents	
	<b>✓</b> No				1
	Yes. Desc	ribe			
27.	Licenses, fran	 nchises, and other general	intangibles		
			ses, cooperative association holdings, liquor lic	censes, professional licenses	
	✓ No	e9			1
	Yes. Desc	ribe			
140					Current value of the
Mor	ney or prope	erty owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
	ney or prope				portion you own? Do not deduct secured
	Tax refunds ov	wed to you			portion you own?  Do not deduct secured claims or exemptions.
	Tax refunds ov  ✓ No  Yes. Give s about	wed to you specific information t them, including whether		Federal:	portion you own?  Do not deduct secured claims or exemptions.  \$0.00
	Tax refunds ov  ✓ No  Yes. Give s about you a	wed to you specific information			portion you own?  Do not deduct secured claims or exemptions.
28.	Tax refunds on No Yes. Give s about you a and th	wed to you specific information t them, including whether lready filed the returns ne tax years		Federal:	portion you own?  Do not deduct secured claims or exemptions.  \$0.00
28.	Tax refunds on  No Yes. Give s about you a and th	wed to you specific information t them, including whether lready filed the returns ne tax years	ousal support, child support, maintenance, divor	Federal: State: Local:	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00
28.	Tax refunds on  No Yes. Give s about you a and th	wed to you specific information t them, including whether lready filed the returns ne tax years	ousal support, child support, maintenance, divor	Federal: State: Local: rce settlement, property settlement	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds ov  No Yes. Give s about you a and th  Family suppor Examples: Past	wed to you specific information t them, including whether lready filed the returns ne tax years	ousal support, child support, maintenance, divor	Federal: State: Local: rce settlement, property settlement Alimony:	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds ov  No Yes. Give s about you a and th  Family suppor Examples: Past	wed to you  specific information t them, including whether llready filed the returns ne tax years  t due or lump sum alimony, sp	ousal support, child support, maintenance, divor	Federal: State: Local: rce settlement, property settlement	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds ov  No Yes. Give s about you a and th  Family suppor Examples: Past	wed to you  specific information t them, including whether llready filed the returns ne tax years  t due or lump sum alimony, sp	ousal support, child support, maintenance, divor	Federal: State: Local: rce settlement, property settlement Alimony:	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds ov  No Yes. Give s about you a and th  Family suppor Examples: Past	wed to you  specific information t them, including whether llready filed the returns ne tax years  t due or lump sum alimony, sp	ousal support, child support, maintenance, divor	Federal: State: Local: rce settlement, property settlement Alimony: Maintenance:	\$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds ov  No Yes. Give s about you a and th  Family suppor Examples: Past  No Yes. Give s	wed to you  specific information t them, including whether Ilready filed the returns ne tax years  t due or lump sum alimony, sp	ousal support, child support, maintenance, divor	Federal: State: Local: rce settlement, property settlement  Alimony: Maintenance: Support:	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds on  No Yes. Give s about you a and th  Family suppor Examples: Past  No Yes. Give s  Other amounts Examples: Unpa	wed to you  specific information t them, including whether lready filed the returns ne tax years  t due or lump sum alimony, sp specific information	ousal support, child support, maintenance, divor e payments, disability benefits, sick pay, vacation cans you made to someone else	Federal: State: Local: rce settlement, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds on  No Yes. Give s about you a and th  Family suppor Examples: Past  No Yes. Give s  Other amounts Examples: Unpa	wed to you  specific information t them, including whether lready filed the returns ne tax years  t due or lump sum alimony, sp specific information	e payments, disability benefits, sick pay, vacation	Federal: State: Local: rce settlement, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds ov  ✓ No  ☐ Yes. Give s about you a and th  Family suppor Examples: Past ✓ No ☐ Yes. Give s  Other amounts Examples: Unpa	specific information t them, including whether llready filed the returns ne tax years  t due or lump sum alimony, sp specific information	e payments, disability benefits, sick pay, vacation	Federal: State: Local: rce settlement, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

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Deb	otor 1 Kimberly L	Johnson	Case number (if known)	
	First Name Middle	Name Last Name		
31.	Interests in insurance policies  Examples: Health, disability, or life insurance	e; health savings account (HSA); credit, ho	neowner's, or renter's insurance	
	No	Company name:	Beneficiary:	Surrender or refund value:
	Yes. Name the insurance company of each policy and list its value	Term life with employer		\$0.00
				<u>******</u>
		-		
32.	Any interest in property that is due you If you are the beneficiary of a living trust, ex property because someone has died.	from someone who has died pect proceeds from a life insurance policy, or	are currently entitled to receive	
	<b>✓</b> No			
	Yes. Describe			
	_			
33.	Claims against third parties, whether or Examples: Accidents, employment disputes		emand for payment	
	<b>✓</b> No			
	Yes. Describe			
34.	Other contingent and unliquidated clair to set off claims	ms of every nature, including countercl	aims of the debtor and rights	
	<b>✓</b> No			
	Yes. Describe			
35.	Any financial assets you did not already	list		
	<b>✓</b> No			
	Yes. Describe			
36.	Add the dollar value of all of your entries	s from Part 4, including any entries for p	ages you have attached	\$3160.00
	for Part 4. Write that number here		<b>&gt;</b>	
Par	5: Describe Any Business-Rela	ed Property You Own or Have ar	Interest In. List any real estate	in Part 1.
37.	Do you own or have any legal or equital	ole interest in any business-related prope		
	✓ No. Go to Part 6.			current value of the ortion you own?
	Yes. Go to line 38.		-	o not deduct secured claims
			Of	r exemptions
38.	Accounts receivable or commissions yo	u already earned		
	<b>✓</b> No			
	Yes. Describe			
39.			nes, rugs, telephones, desks, chairs, electro	nic devices
	<b>✓</b> No			
	Yes. Describe			

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Deb	tor 1 Kimberly First Name	L Middle Name	Johnson Last Name	Case number (if known)	
40.			e in business, and tools of yo	ur trade	
	✓ No	1-1	,		
	Yes. Describe				
	_				
41.	Inventory				
	✓ No				
	Yes. Describe				
42	Interests in partnersh	nins or joint ventures			
72.	✓ No	iips or joint ventures			
	Yes. Give specific	N	ame of entity:	% of ownership:	
	information about	_			
	them	_		<del></del>	
		_			
43 (	Customer lists, mailing	 lists, or other compilation	ne .		
10. \	No	, note, or other complication			
	_	nclude personally identifiable	information (as defined in 11 U.S	S.C. 8 101(41A))?	
		ionado perceriany identinacio		20.3.0.(,,,.	
	∐ No				
	Yes. Desc	cribe			
44.	Any business-related	property you did not alread	ly list		
	<b>✓</b> No				
	Yes. Give specific				
	information	<del>-</del>			
		_			
		_			
		_			
		_			
			5, including any entries for p	ages you have attached	
Part		Farm- and Commerciand in interest in farmland, list it in		erty You Own or Have an Interest I	n.
46.	Do you own or have a	any legal or equitable inter	est in any farm- or commercia	I fishing-related property?	
	✓ No. Go to Part 7.				Current value of the
	Yes. Go to line 47.				portion you own?  Do not deduct secured
	_				claims
47	Farm animals				or exemptions
77.	Examples: Livestock, po	oultry, farm-raised fish			
	<b>✓</b> No				
	Yes. Describe				
	_ <del>_</del>				

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Debt	or 1 Kimberly	L Middle Norma	Johnson	Case number (if known)	
10	First Name  Crops-either growing	Middle Name	Last Name		
48.	_	or narvested			
	✓ No				
	Yes. Describe				
49.	Farm and fishing equ	ipment, implements, machinery, fixtu	res, and tools of trade		
	<b>✓</b> No				
	Yes. Describe				
	Tes. Describe				
50.	Farm and fishing sup	plies, chemicals, and feed			
	<b>✓</b> No				
	Yes. Describe				
	_				
<b>51</b>	Any form, and comme	 ercial fishing-related property you did	not alroady list		
51.	_	ercial hanning-related property you did	not already list		
	✓ No				
	Yes. Describe				
4	dalah sa dallam sa basa at s	II of comments of the Book Starker Book			
		ıll of your entries from Part 6, includin r here		•	
				•	
Part	Doscribo All B	roperty You Own or Have an In	torost in That You	Did Not List Abovo	
		operty of any kind you did not already		DIG NOT LIST ABOVE	
55.		ts, country club membership	not:		
	✓ No				
	Yes. Give specific				
	information				
54. A	dd the dollar value of a	III of your entries from Part 7. Write th	at number here		
		o. <b>,</b> o o o o o o o		•	
		(F. 1.5. (4) F			
Part	List the lotals	of Each Part of this Form			
55. <b>F</b>	art 1: Total real estate,	line 2		<b>&gt;</b>	
	•				
56. <b>p</b>	art 2 total vehicles, lin	e 5		<u> </u>	
57. <b>P</b>	art 3: Total personal ar	nd household items, line 15	\$2200.00		
58. <b>P</b>	art 4: Total financial as	sets, line 36	\$3160.00		
FO <b>E</b>	lort F. Total business r	related property line 45	φ3100.00	<u> </u>	
59. F	rart 5: Total business-r	elated property, line 45		<u> </u>	
60. <b>F</b>	art 6: Total farm- and	fishing-related property, line 52		<u>_</u>	
61. <b>F</b>	art 7: Total other prop	erty not listed, line 54			
62 <b>T</b>	otal nersonal property	د. Add lines 56 through 61			
ا . ا	otal porsonal property	.,	\$5360.00	Copy personal property total ▶	+ \$5360.00
			<u> </u>	2277 7223.00 7.000.07	
					\$5360.00
63. <b>T</b> 6	otal of all property on S	Schedule A/B. Add line 55 + line 62			

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Fill in this information to identify your case:						
Debtor 1	Kimberly	L	Johnson			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filin	g) First Name	Middle Name	Last Name			
United States I	Bankruptcy Court for the:	Northern	District of Illinois			
(State)						
Case number						
(If known)						

#### Official Form 106C

#### Check if this is an amended filing

#### Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Par	t 1: Identify the Property You Cla	im as Exempt				
1. 2.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.  ✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  ✓ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)  For any property you list on Schedule A/B that you claim as exempt, fill in the information below.					
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own  Copy the value from Schedule A/B	Amount of the exemption you claim  Check only one box for each exemption.	Specific laws that allow exemption		
	Brief description:  Royal Savings Bank  Line from Schedule A/B: 17	\$1,000.00	\$1,000.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)		
	Brief description:  Used Furniture  Line from Schedule A/B: 06	\$900.00	\$900.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)		
3.	Are you claiming a homestead exemptio (Subject to adjustment on 4/01/19 and every  No Yes. Did you acquire the property covere No Yes	3 years after that for ca				

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Debtor 1 Kimberly Johnson Case number (if known) First Name Middle Name Last Name Part 2: **Additional Page** Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you Check only one box for each exemption. property own Copy the value from Schedule A/B 735 ILCS 5/12-1001(b) Brief \$60.00 **✓** description: \$60.00 Green Dot Debit card 100% of fair market value, up to any applicable statutory limit Schedule A/B: 735 ILCS 5/12-1001(a) Brief \$350.00 **V** description: \$350.00 **Used Clothing** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: Brief 735 ILCS 5/12-1006 \$2,000.00 description: ✓ \$2,000.00 With Employer 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 735 ILCS 5/12-1001(f) Brief \$0.00 **V** description: \$0 Term life with employer 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: Brief 735 ILCS 5/12-1001(b) \$850.00 description: \$850.00 **Used Electronics** 100% of fair market value, up to any (cellphone, 2 tv, tablet) applicable statutory limit Line from Schedule A/B: Brief 735 ILCS 5/12-1001(b) \$100.00 **✓** description: \$100.00 misc Jewelry 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 12 Brief 735 ILCS 5/12-1001(b) \$100.00 **V** description: \$100.00 Royal Bank 100% of fair market value, up to any Line from applicable statutory limit

Schedule A/B:

17

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Fill in	n this information to identify your ca	ase:				
Debt	tor 1 Kimberly	L	Johnson			
	First Name	Middle Name	Last Name			
Debt	tor 2					
(Spo	use, if filing) First Name	Middle Name	Last Name			
Unite	ed States Bankruptcy Court for the:	Northern	District of Illinois			
			(State)			
Case (If kno	e number					
Off	icial Form 106D					Check if this is ar amended filing
Sc	hedule D: Cred	itors Who Ha	ave Claims Secu	red by Pro	perty	12/1
space			le are filing together, both are equa the entries, and attach it to this for			
1.	Do any creditors have claims se	ecured by your property?				
	No. Check this box and subm	it this form to the court with y	our other schedules. You have nothing	g else to report on this f	orm.	
	Yes. Fill in all of the information	n below.				
Part	1: List All Secured Claim	ıs				
2.	List all secured claims. If a credi	tor has more than one secu	red claim, list the creditor separately	Column A	Column B	Column C
	for each claim. If more than one c much as possible, list the claims in	•	n, list the other creditors in Part 2. As ng to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any

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Fill	in this inform	ation to identify your cas	e:					
De	btor 1	Kimberly	L	Johnson				
		First Name	Middle Name	Last Name	_			
	btor 2 ouse, if filing	First Name	Middle Name	Last Name	_			
Un	ited States Ba	ankruptcy Court for the:	Northern	District of Illinois (State)	_			
	se number			(State)	_			
(If k	(nown)							
Of	ficial F	orm 106E/F				∐ Ch	neck if this is ar	n amended filing
S	chedu	le F/F: Cre	ditors Who	Have Unsecui	red Claims			12/15
part 106/ that entr	y to any exe A/B) and on are listed in	cutory contracts or un Schedule G: Executor Schedule D: Creditor	expired leases that could y Contracts and Unexpire s Who Hold Claims Secu	ors with PRIORITY claims and I result in a claim. Also list exected Leases (Official Form 1066) ared by Property. If more space this page. On the top of any states are the space of this page.	utory contracts on Sch Do not include any cre is needed, copy the Pa	edule A/B editors with art you nee	e: Property (O h partially sec ed, fill it out, r	fficial Form cured claims number the
Pai	t 1: List /	All of Your PRIORIT	TY Unsecured Claim	s				
1.	Do any cre	editors have priority ur	nsecured claims against y	ou?				
	✓ No. G	o to Part 2.						
	Yes.							
2.	listed, iden much as po Continuation	ify what type of claim it is ossible, list the claims in on Page of Part 1. If more	s. If a claim has both priority alphabetical order accordino e than one creditor holds a	nore than one priority unsecured of and nonpriority amounts, list that g to the creditor's name. If you have particular claim, list the other cred or this form in the instruction book	claim here and show both ve more than two priority litors in Part 3.	n priority an	d nonpriority a	mounts. As
						Total	Priority	Nonpriority

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Debte		hnson Case number (if known)								
		st Name								
Part :	Part 2: List All of Your NONPRIORITY Unsecured Claims									
3.	Do any creditors have nonpriority unsecured claims against yo	u?								
'	No. You have nothing to report in this part. Submit this form to the court with your other schedules.									
'	✓ Yes.									
	If more than one creditor holds a particular claim, list the other crediton Page of Part 2.	ors in Part 3.lf you have more than four priority unsecured claims fill out the	Continuation							
			Total claim							
4.1	CENTCREDSERV	- Last 4 digits of account number 5602 -	\$566.00							
	Nonpriority Creditor's Name PO BOX 7230	When was the debt incurred? 10/1/2015								
	Number Street	<u></u>								
		As of the date you file, the claim is: Check all that apply.								
	OVERLAND PARK Kansas 66207	Contingent								
	City State Zip Code	Unliquidated								
	Who incurred the debt? Check one.  Debtor 1 only	Disputed								
	Debtor 1 only  Debtor 2 only	Type of NONPRIORITY unsecured claim:								
	<b>블</b> '	Student loans								
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce								
	At least one of the debtors and another	that you did not report as priority claims								
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts								
	Is the claim subject to offset?	Collection; Collecting for								
	✓ No	ORIGINAL CREDITOR:								
	Yes	Other. Specify MEDICAL								
4.2	Chase Bank Nonpriority Creditor's Name	- Last 4 digits of account number -	\$2,330.55							
	340 S. Cleveland Bldg 370	When was the debt incurred? n/a								
	Number Street	As of the date year file the element in Charle all that apply								
	OH1-1073	As of the date you file, the claim is: Check all that apply.  Contingent								
	Westerville Ohio 43081									
	City State Zip Code Who incurred the debt? Check one.	Unliquidated								
	Debtor 1 only	Disputed								
	Debtor 2 only	Type of NONPRIORITY unsecured claim:								
	Debtor 1 and Debtor 2 only	Student loans								
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims								
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar								
	Is the claim subject to offset?	debts  ✓ Other. Specify NSF								
	✓ No	<del></del>								
<u> </u>	Yes									
4.3	Comcast Nonpriority Creditor's Name	- Last 4 digits of account number	\$700.00							
	11621 E. Marginal Way # 5 Number Street	When was the debt incurred?n/a								
	Bankruptcy Dept	As of the date you file, the claim is: Check all that apply.								
	Seattle Washington 98168	Contingent								
	City State Zip Code	Unliquidated								
	Who incurred the debt? Check one.  Debtor 1 only	Disputed								
	<b>≌</b> ′	Type of NONPRIORITY unsecured claim:								
	Debtor 2 only	Student loans								
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce								
	At least one of the debtors and another	that you did not report as priority claims								
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts								
	Is the claim subject to offset?	✓ Other. Specify <u>Unsecured</u>								
	Yes									
	L 100									

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ebtor 1 Kimberly L First Name Middle Name	Johnson Case number (if known)  Last Name	_
rt 2: Your NONPRIORITY Unsecured Claims	s - Continuation Page	
<u> </u>	n beginning with 4.5, followed by 4.6, and so forth.	Total claim
4 ComEd	Last 4 digits of account number	\$1,417.72
Nonpriority Creditor's Name 3 Lincoln Center	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
Bankruptcy Section	Contingent	
Oakbrook Terrace Illinois 60181	Unliquidated	
Oakbrook Terrace Illinois 60181 City State Zip Co	· ·	
Who incurred the debt? Check one.  Debtor 1 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 only  Debtor 2 only	Student loans	
Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
At least one of the debtors and another	that you did not report as priority claims	
H	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim relates to a community deb Is the claim subject to offset?	Other. Specify Unsecured	
✓ No	_	
Yes		
5 COMMONWEALTH FINANCIAL	Last 4 digits of account number 78N1	\$566.00
Nonpriority Creditor's Name 245 Main St	When was the debt incurred? 3/1/2015	
Number Street		
	As of the date you file, the claim is: Check all that apply.	
Scranton Pennsylvania 18519	I I a Para A dia Cara I	
City State Zip Co Who incurred the debt? Check one.	Disputed	
Debtor 1 only	Type of NONPRIORITY unsecured claim:	
Debtor 2 only	Student loans	
Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
At least one of the debtors and another	that you did not report as priority claims	
Check if this claim relates to a community deb		
Is the claim subject to offset?	debts  001 Collection; Collecting for	
No	ORIGINAL CREDITOR:	
Yes	Other. Specify <u>MEDICAL PAYMENT DATA</u>	
6 Crandon Emergency Physicians Nonpriority Creditor's Name	Last 4 digits of account number	\$721.00
8012 S Crandon Ave	When was the debt incurred?n/a	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
Chicago Illinois 60617	Unliquidated	
City State Zip Co	ode Disputed	
Who incurred the debt? Check one.  Debtor 1 only	Type of NONPRIORITY unsecured claim:	
Debtor 2 only	Student loans	
Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
At least one of the debtors and another	that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar	
Check if this claim relates to a community deb		
Is the claim subject to offset?	Other. Specify Medical Bills	
✓ No		
Yes		

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Debto	or 1 Kimberly L	Johnson Case number (if known)					
	First Name Middle Name	Last Name					
Part 2	Your NONPRIORITY Unsecured Claims - Cont	tinuation Page					
After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.							
4.7	Dish Network	Last 4 digits of account number	\$220.00				
	Nonpriority Creditor's Name 9601 S Meridian Blvd						
	Number Street	When was the debt incurred?n/a					
		As of the date you file, the claim is: Check all that apply.					
		Contingent					
	Englewood Colorado 80112	Unliquidated					
	City State Zip Code Who incurred the debt? Check one.	Disputed					
	Debtor 1 only	Type of NONPRIORITY unsecured claim:					
	Debtor 2 only	Student loans					
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce					
	At least one of the debtors and another	that you did not report as priority claims					
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts					
	Is the claim subject to offset?	✓ Other. Specify Unsecured					
	✓ No	—					
	Yes						
4.8	MBB	Last A Paris of account name to a contract	\$150.00				
1.0	Nonpriority Creditor's Name	— Last 4 digits of account number 3671	Ψ100.00				
	1550 N NORTWEST HWY STE 403 Number Street	When was the debt incurred? 12/1/2012					
		As of the date you file, the claim is: Check all that apply.					
	PARK RIDGE Illinois 60068	Contingent					
	City State Zip Code	Unliquidated					
	Who incurred the debt? Check one.  Debtor 1 only	Disputed					
	<u>'</u>	Type of NONPRIORITY unsecured claim:					
	Debtor 2 only	Student loans					
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce					
	At least one of the debtors and another	that you did not report as priority claims					
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts					
	Is the claim subject to offset?	001 Collection; Collecting for					
	✓ No	ORIGINAL CREDITOR: Other. Specify MEDICAL PAYMENT DATA					
	Yes	Other. Specify					
4.9	PEOPLES ENGY Nonpriority Creditor's Name	Last 4 digits of account number 7278	\$655.00				
	200 EAST RANDOLPH	When was the debt incurred? 6/1/2015					
	Number Street	As of the date you file, the claim is: Check all that apply.					
		Contingent					
	CHICAGO Illinois 60601 City State Zip Code	Unliquidated					
	Who incurred the debt? Check one.	Disputed					
	Debtor 1 only	Type of NONPRIORITY unsecured claim:					
	Debtor 2 only	Student loans					
	Debtor 1 and Debtor 2 only						
	At least one of the debtors and another	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>					
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar					
	Is the claim subject to offset?	debts					
	✓ No	✓ Other. SpecifyInstallmentLoan					
	Yes						

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Debtor		Johnson	Case number (if known)					
	First Name Middle Name	Last Name						
Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page								
	After listing any entries on this page, number them begin	ning with 4.5, follo	owed by 4.6, and so forth.	Total claim				
4.10	Planet Fitness Nonpriority Creditor's Name 240 E Illinois	Last 4 digits	s of account number	\$100.00				
		When was the	the debt incurred?n/a					
	Number Street	As of the dat	As of the date you file, the claim is: Check all that apply.					
	Chicago Illinois 60611	Continge						
	City State Zip Code	Unliquida	ated					
	Who incurred the debt? Check one.  ✓ Debtor 1 only  Debtor 2 only	Disputed						
		Type of NON	NPRIORITY unsecured claim:					
	Debtor 1 and Debtor 2 only	Student le	loans					
	At least one of the debtors and another		ons arising out of a separation agreement or did not report as priority claims	divorce				
	Check if this claim relates to a community debt	Debts to debts	pension or profit-sharing plans, and other s	imilar				
	Is the claim subject to offset?		pecify Membership Dues					
	✓ No		. ,					
	Yes							
4.11	US Bank Nonpriority Creditor's Name	Last 4 digits	s of account number	\$325.20				
	425 Walnut Street	When was t	the debt incurred? n/a					
	Number Street	As of the da	te you file, the claim is: Check all that appl	V.				
		Continge		,				
	Cincinnati Ohio 45202 City State Zip Code	Unliquida	ated					
	Who incurred the debt? Check one.  Debtor 1 only	Disputed	d					
		Type of NON	NPRIORITY unsecured claim:					
	Debtor 2 only	Student le	loans					
	Debtor 1 and Debtor 2 only  At least one of the debtors and another		ons arising out of a separation agreement or	divorce				
	Check if this claim relates to a community debt		did not report as priority claims  pension or profit-sharing plans, and other s	imilar				
	Is the claim subject to offset?	debts	, periode of profit officing plane, and officing	III III GI				
	✓ No	✓ Other. Sp	pecify <u>Unsecured</u>					
	Yes							

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Debtor 1	Kimberly	L		Johnson	Case number (if known)
	First Name	Midd	e Name	Last Name	
Part 3:	List Others to E	Be Notified Al	out a Debt That	You Already Lis	sted
coll age you	ection agency is try ncy here. Similarly, i do not have additi exsystems	ring to collect fro f you have more	om you for a debt yo than one creditor fo	u owe to someone or or any of the debts t debts in Parts 1 or 2	or a debt that you already listed in Parts 1 or 2. For example, if a else, list the original creditor in Parts 1 or 2, then list the collection that you listed in Parts 1 or 2, list the additional creditors here. If 2, do not fill out or submit this page.
780	05 Hudson Rd # 100 mber Street			Line 4 <u>.2</u>	of (Check Part 1: Creditors with Priority Unsecured Claims one):  Part 2: Creditors with Nonpriority Unsecured Claims
Wo City	odbury y	Minnesota State	55125 Zip Code	Last 4 digits of ac	ccount number

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Debtor 1 Kimberly Johnson Case number (if known) First Name Add the Amounts for Each Type of Unsecured Claim Part 4: Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 **Total claims** 6a. Domestic support obligations. from Part 1 \$0.00 6b. Taxes and certain other debts you owe the government \$0.00 6c. Claims for death or personal injury while you were intoxicated \$0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. \$0.00 6e. Total. Add lines 6a through 6d. 6e. **Total claims** \$0.00 **Total claims** 6f. Student loans 6f. from Part 2 \$0.00 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims \$0.00 6h. Debts to pension or profit-sharing plans, and other similar 6h. \$7,751.47 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. \$7,751.47 6j. Total. Add lines 6f through 6i.

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Fill in this infor	mation to identify your cas	e:			
Debtor 1	Kimberly	L	Johnson		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filir	ng) First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	Northern	District of Illinois		
		•	(State)		
Case number (If known)					
(II KIIOWII)					
Official	Form 106G			Check if this is amended filing	
Schedu	ile G: Execut	ory Contract	s and Unexpir	ired Leases	2/15
space is need				n are equally responsible for supplying correct information. If mo o this page. On the top of any additional pages, write your name	
1. Do you l	have any executory	contracts or unexpi	red leases?		
✓ No. Ch	neck this box and file this fo	orm with the court with your o	other schedules. You have no	nothing else to report on this form.	
Yes. Fi	III in all of the information b	elow even if the contracts o	r leases are listed on <i>Schedu</i>	edule A/B: Property (Official Form 106A/B).	
				Then state what each contract or lease is for (for example, rent, ore examples of executory contracts and unexpired leases.	

Person or company with whom you have the contract or lease

State what the contract or lease is for

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Fill	in this inform	nation to identify your cas	so.		
	btor 1	Kimberly		Johnson	
De	DIOI I	First Name	Middle Name	Last Name	_
_	btor 2				
(Sp	ouse, if filing	j) First Name	Middle Name	Last Name	
Un	ited States E	Sankruptcy Court for the:	Northern	District of Illinois	
Ca	se number			(State)	
	(nown)				_
					Check if this is an
_					amended filing
<u>O</u>	ficial I	Form 106H			
Sc	hedul	e H: Your C	odebtors		12/15
				to you may have. Be as some	plete and accurate as possible. If two married people are filing
	✓ No ☐ Yes Within the Idaho, Loui ✓ No. G	e last 8 years, have you siana, Nevada, New Mex to line 3.		shington, and Wisconsin.)	ebtor.)  nmunity property states and territories include Arizona, California,
		No		•	
		Yes. In which community	state or territory did you live?	Fill in t	he name and current address of that person.
		Name of your spouse, f	former spouse, or legal equiv	valent valent	_
		Number Street			-
		City	State	Zip Code	_
3.	again as a	codebtor only if that p	erson is a guarantor or co	osigner. Make sure you have	ur spouse is filing with you. List the person shown in line 2 listed the creditor on <i>Schedule D</i> (Official Form 106D), e <i>D</i> , <i>Schedule E/F</i> , or <i>Schedule G</i> to fill out Column 2.

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Official Form 106H Schedule H: Your Codebtors page 1

Column 1: Your codebtor

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Fill in this information to identi  Debtor 1 Kimberly	fv vour case:				
Debtor 1 Kimberly	., ,				
	L	Johnson			
First Name	Middle Name	Last Name		Check if this is:	
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name	<del></del>	An amended filing	
		Lastivame		A supplement showing post-petition of	chanter 1
United States Bankruptcy Court for the:	Northern	District of Illinois (State)		expenses as of the following date:	парієї
Case number		(State)			
If known)				MM / DD / YYYY	
Official Form 106I					
Schedule I: Your In	come				12/1
Part 1: Describe Employm	name and case numbe			eet to this form. On the top of a	
Fill in your employment		Debtor 1		Debtor 2	
information.					
	Employment status	. Employed		Employed	
If you have more than one	Employment status	Employed  Not Employed		Employed	
If you have more than one job,		Not Employed		Employed  Not Employed	
If you have more than one job, attach a separate page with information about additional					
If you have more than one job, attach a separate page with		Not Employed			
If you have more than one job, attach a separate page with information about additional employers.  Include part time, seasonal,	Occupation	Not Employed  Cashier  Home Depot  2455 Paces Ferry Road	d		
If you have more than one job, attach a separate page with information about additional employers.	Occupation Employer's name	Not Employed  Cashier  Home Depot	d		
If you have more than one job, attach a separate page with information about additional employers.  Include part time, seasonal, or self-employed work.  Occupation may include	Occupation Employer's name	Not Employed  Cashier  Home Depot  2455 Paces Ferry Road	d	Not Employed	
If you have more than one job, attach a separate page with information about additional employers.  Include part time, seasonal, or self-employed work.	Occupation Employer's name	Cashier Home Depot  2455 Paces Ferry Road Number Street		Not Employed	
If you have more than one job, attach a separate page with information about additional employers.  Include part time, seasonal, or self-employed work.  Occupation may include student	Occupation Employer's name	Not Employed  Cashier  Home Depot  2455 Paces Ferry Road		Not Employed	le

Official Form 106I Schedule I: Your Income page 1

\$1,985.75

4. Calculate gross income. Add line 2 + line 3.

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Debtor 1	Kimberly	L Middle News	Johnson	Case number	(if known)	
	First Name	Middle Name	Last Name	For Debtor 1	For Debtor 2 or non-filing spouse	
	line 4 here		4.	\$1,985.75		
→ 5 Liot o	المصريحال طمطر					
	ll payroll ded av Medicare	and Social Security deductions	5a.	\$310.09		
		ntributions for retirement plans	5b.	\$0.00		
		ributions for retirement plans	5c.	\$0.00		
	•	yments of retirement fund loans	5d.	\$0.00		
	surance	yments of retirement runa loans	5e.	\$105.41		
		ort obligations	5f.	\$0.00		
	Inion dues	ort obligations	5g.	\$0.00		
•		ons. Specify:	•	\$0.00	+	
		ductions. Add lines 5a + 5b + 5c + 5d + 5e		\$415.50	' <del></del>	
+5h.			-			
7. Calcu	late total mor	nthly take-home pay. Subtract line 6 from l	ine 4. 7.	\$1,570.25		
8. List a	ll other incom	e regularly received:				
b	usiness, prof	om rental property and from operating a ession, or farm				
re		ent for each property and business showing y and necessary business expenses, and th me.		\$0.00		
8b. <b>I</b> n	terest and di	vidends	8b.	\$0.00		
<b>d</b> e In	ependent reg iclude alimony,	t payments that you, a non-filing spouse ularly receive spousal support, child support, maintenance nt, and property settlement.		\$124.00		
		t compensation	8d.	\$0.00		
	ocial Security	•	8e.	\$0.00		
Ind as the su	clude cash ass sistance that y e Supplementa bsidies	ent assistance that you regularly receive istance and the value (if known) of any non- ou receive, such as food stamps (benefits u al Nutrition Assistance Program) or housing	cash nder	0000		
	pecify:		8f.	\$0.00		
Ū		irement income	8g.	\$0.00	<del></del>	
	-	income. Specify:		\$0.00	+	
9. Add a	III other incon	ne Add lines 8a + 8b + 8c + 8d + 8e + 8f +8	g + 8h. 9.	\$124.00		
		income. Add line 7 + line 9. ne 10 for Debtor 1 and Debtor 2 or non-filing	10. g spouse	\$1,694.25	+ =	\$1,694.25
Includ relativ	de contributions ves.	ular contributions to the expenses that is from an unmarried partner, members of yo	ur household, your dep	endents, your roommate		
_		amounts already included in lines 2-10 or am	ounts that are not avai	lable to pay expenses list		
Spec	ify:					+ \$0.00
		n the last column of line 10 to the amount the Summary of Schedules and Statistical				\$1,694.25
						Combined monthly income
13. <b>Do</b> y	ou expect an	increase or decrease within the year after	er you file this form?			
<b>✓</b>	No.					
	Yes. Explain:					

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Fill in this infor	mation to identify yo	our case:			
		-	lohnson		
Debtor 1	Kimberly First Name	L Middle Name	Johnson Last Name		
Debtor 2				Check if this is:	
(Spouse, if filin	g) First Name	Middle Name	Last Name	An amended filing	3
United States B	Bankruptcy Court fo	r the: Northern	District of Illinois	A supplement sh	owing post-petition chapter 13
Case number			(State)	expenses as of th	e following date:
(If known)				MM / DD / YYYY	<del>,</del>
Official	Form 106	SJ		, 22, , , ,	
Schedu	le J: Your	Expenses			12/15
information. If (if known). Ans					
1. Is this a join		isenoiu			
	o to line 2				
		in a separate household?			
L res. D	_	m a separate nousenoid?			
_ L	No				
	Yes. Debtor 2 m	nust file Official Forms 106J-2, Expens	ses for Separate Household of Debt	for 2.	
2. Do you hav dependents?		☐ No			
Do not list D Debtor 2.	ebtor 1 and	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2 Child	Dependent's age  18 years	Does dependent live with you?  No.  Yes.
	d your	✓ No  Yes			Į. i vo.
Part 2: Esti	mate Your Ong	oing Monthly Expenses			
-	of a date after the	our bankruptcy filing date unless y bankruptcy is filed. If this is a sup		•	-
-	•	non-cash government assistance uded it on Schedule I: Your Income	-		Your expenses
	or home ownershor the ground or lot.	nip expenses for your residence. Ind 4.	clude first mortgage payments and		\$ <b>600.00</b>
If not inc	luded in line 4:				
4a. Real e	state taxes				4a <b>\$0.00</b>
4b. Proper	rty, homeowner's, o	r renter's insurance			4b. <b>\$0.00</b>
4c. Home	maintenance, repair	, and upkeep expenses			4c. <b>\$0.00</b>
4d. Home	owner's association	or condominium dues			4d. <b>\$0.00</b>

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Johnson Debtor 1 Kimberly Case number (if known) First Name Middle Name Your expenses 5. Additional mortgage payments for your residence, such as home equity loans \$0.00 5. 6. Utilities: 6a. Electricity, heat, natural gas \$100.00 6a. 6b. Water, sewer, garbage collection \$0.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services \$125.00 6c. 6d. Other. Specify: \$0.00 6d 7. Food and housekeeping supplies \$400.00 7. 8. Childcare and children's education costs \$0.00 8. 9. Clothing, laundry, and dry cleaning 9. \$150.00 10. Personal care products and services 10. \$150.00 11. Medical and dental expenses \$35.00 11. 12. Transportation. Include gas, maintenance, bus or train fare. \$200.00 12. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 13. 14. Charitable contributions and religious donations \$0.00 14. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance \$0.00 15a 15b. Health insurance \$0.00 15b 15c. Vehicle insurance 15c \$0.00 15d. Other insurance. Specify: ___ 15d \$0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: \$0.00 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a \$0.00 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: __ \$0.00 17c 17d. Other. Specify: \$0.00 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted from \$0.00 your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property \$0.00 20a 20b. Real estate taxes. \$0.00 20h 20c. Property, homeowner's, or renter's insurance \$0.00 20c 20d. Maintenance, repair, and upkeep expenses. \$0.00 20d 20e. Homeowner's association or condominium dues \$0.00 20e

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Debtor 1	Kimberly	L	Johnson	Case number (if known)		
	First Name	Middle Name	Last Name			
21.Other	Specify:				21	\$0.00
22. <b>Calc</b> u	ulate your monthly expense	s.				\$1,760.00
22a. <i>A</i>	Add lines 4 through 21.					\$0.00
22b. C	Copy line 22 (monthly expense	es for Debtor 2), if any, fro	m Official Form 106J-2			\$1,760.00
22c. A	add line 22a and 22b. The resu	ılt is your monthly expens	ses.		22.	<u> </u>
23.Calcu	late your monthly net incor	ne.				
23a. C	Copy line 12 (your combined m	nonthly income) from Sch	edule I.		23a	\$1,694.25
23b. C	Copy your monthly expenses fro	om line 22 above.			23b	\$1,760.00
	Subtract your monthly expense:		ne.			(\$65.75)
•	The result is your monthly net	income.			23c	
24. <b>Do yo</b>	ou expect an increase or de	crease in your expense	es within the year after you	file this form?		
	example, do you expect to finis gage payment to increase or o					
1	No					
	/es					
	Explain here:					

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Fill in this information to identify your case:									
Debtor 1	Kimberly	L	Johnson						
	First Name	Middle Name	Last Name						
Debtor 2									
(Spouse, if fili	ng) First Name	Middle Name	Last Name						
United States	Bankruptcy Court for the:	Northern	District of Illinois						
Case number (If known)			(State)						

### Official Form 106Dec

### Check if this is an amended filing

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	t1: Sign Below	
	Did you pay or agree to pay someone who is NOT an attorney to h	elp you fill out bankruptcy forms?
	<b>☑</b> No	
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
	Under penalty of perjury, I declare that I have read the summary at that they are true and correct.	nd schedules filed with this declaration and
×	/s/ Kimberly Johnson	*
	Signature of Debtor 1	Signature of Debtor 2
	Date <b>9/13/2016</b>	Date
	MM/DD/YYYY	MM/DD/YYYY

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			Boodinone 1	ago II ol oo		
Fill in this info	rmation to identify your ca	se:				
Debtor 1	Kimberly	L	Johnson			
	First Name	Middle N				
Debtor 2						
(Spouse, if fill	ng) First Name	Middle N	lame Last Nar	ne		
United States	Bankruptcy Court for the:	Northern	District of Illino			
Case number			(Sta	ite)		
(If known)						
Official	Form 107			<u>'</u>		Check if this is amended filing
Statem	ent of Financ	ial Affairs	for Individu	als Filing for Ba	ankruptcy	′ 12
1. What in the second of the s	is your current marital sarried by married by the last 3 years, have you	tatus? ou lived anywhere	other than where you live	e now?		
De	ebtor 1:		Dates Debtor 1 lived there	Debtor 2:		Dates Debtor 2 lived there
				Same as Debtor 1		Same as Debtor 1
	49 S Essex Ave., 2nd Floo	or	From 01/1998			From
Nu	umber Street			Number Street		
			To <u>06/2015</u>			To
	nicago Illinois	60649				
Ci	ty State	Zip Code		City State	Zip Code	
				Same as Debtor 1		Same as Debtor 1
<del></del>			From			From
Nι	umber Street			Number Street		

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

City

**✓** No

City

Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Zip Code

State

То

То

Zip Code

State

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btor 1 Kimberly First Name	L Middle	Johr Name Last N		number (if known)	
t 2: Explain the Source	s of Your	Income			
Did you have any income from Fill in the total amount of income activities. If you are filing a joint No  Yes. Fill in the details.	om employn ne you receiv	nent or from operating a keed from all jobs and all busi	nesses, including part-time	-	years?
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current the date you filed for bank		✓ Wages, commissions, bonuses, tips  ☐ Operating a business	\$15906.58	Wages, commissions, bonuses, tips Operating a business	
For last calendar year: (January 1 to December 31,	2015 YYYY	Wages, commissions, bonuses, tips Operating a business	\$21145.92	Wages, commissions, bonuses, tips Operating a business	
For the calendar year before (January 1 to December 31,		Wages, commissions, bonuses, tips Operating a	\$12500.00	Wages, commissions, bonuses, tips Operating a	
case and you have income that List each source and the gross  No Yes. Fill in the details.				sted in line 4.	
		Debtor 1		Debtor 2	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions ar exclusions)
From January 1 of currer the date you filed for ban					
For last calendar year: (January 1 to December 31	, <u>2015</u> YYYY				
For the calendar year bef (January 1 to December 31					

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First Name		L Middle Name	Johnson Last Name	Case nun	nber (if known)	
List Cer	tain Pavmer	nts You Made E	Before You Filed for	Bankruptcv		
e either Deb	tor 1's or Debto	or 2's debts prima	arily consumer debts?			
		r <b>Debtor 2 has pri</b> al, family, or househ		Consumer debts are define	d in 11 U.S.C. § 101(8) as "inc	urred by an individual
During	g the 90 days be	fore you filed for ba	nkruptcy, did you pay any cr	reditor a total of \$6,425* or n	nore?	
□ N	lo. Go to line 7.					
Y	total amoun	nt you paid that cred	ditor. Do not include paymer	s* or more in one or more pa nts for domestic support obl o an attorney for this bankru	gations, such as	
* Subj	ect to adjustmen	t on 4/01/19 and ev	very 3 years after that for ca	ses filed on or after the date	of adjustment.	
Yes. <b>Debto</b>	or 1 or Debtor 2	2 or both have pri	marily consumer debts.			
-		_	-	reditor a total of \$600 or mor	e?	
	lo. Go to line 7.	,	- F 3, , o - p , o - o -	3. Q000 3. IIIO	-	
				or more and the total amount	.,	
	that creditor	r. Do not include pa	ayments for domestic suppo ayments to an attorney for the	ort obligations, such as child	I support and	
			Dates of payment	Total amount paid	Amount you still owe	Was this payment for
Creditor's	Name					Mortgage
Number St	troot					Car
	ii eet					Credit card  Loan repaymer
City	State	Zip Code				Suppliers or vendors
J.,	0.0.0	<u> </u>				Other
Creditor's	Name					Mortgage
Number C	bro of					Car
Number St	neer					Credit card  Loan repaymer
		_				Suppliers or
City	State	Zip Code				vendors
						Other
Creditor's	Name	_				☐ Mortgage ☐ Car
Number St	treet					Credit card
						Loan repaymer
						Suppliers or
City	State	Zip Code				vendors

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Debto	or 1	Kimberly First Name		L Middle Name		nson Name	Case number (ii	known)
li c	nsid corp ager	ers include your rorations of which	elatives; any o you are an off or a business y	general partners; icer, director, per	relatives of any g	eneral partners; par owner of 20% or mo	ore of their voting sec	no was an insider?  Du are a general partner;  Surities; and any managing  mestic support obligations,
[	<b>✓</b>	No Yes. List all paym	ents to an insi	der.	Dates of	Total amount	Amount you	Reason for this payment
					payment	paid	still owe	reason of this payment
		Insider's Name						
		Number Street						
		City	State	Zip Code				
		Insider's Name						
		Number Street						
		City	State	Zip Code				
ir	nsid					payments or trans	fer any property or	n account of a debt that benefited an
	<u> </u>	No Yes. List all payme	-		,			
	_				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
								Include creditor's name
	·	Insider's Name				<del></del>		
	•	Number Street						
		City	State	Zip Code				
	•	Insider's Name						
		Number Street						
		City	State	Zip Code				

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Del	otor 1	Kimberly First Name	L Middle Name		Johnson Last Name	C	ase number <i>(if k</i>	nown)	
Par	t 4:	Identify Legal	Actions, Repossess	sions,	and Foreclosure	es			
9.	List a		ou filed for bankruptcy, v luding personal injury case						ng? custody modifications, and
		No Yes. Fill in the detai	ils.						
				Nature	of the case	Court or a	igency		Status of the case
		Case title							Pending
		0				Court Nam	ie		On appeal
		Case number				NumberStr	reet		Concluded
						City	State	Zip Code	
		Case title							Pending
		0				Court Nam	ie		On appeal
		Case number				NumberStr	eet		Concluded
						City	State	Zip Code	
	<u>✓</u>	No. Go to line 11. Yes. Fill in the info	rmation below.		Describe the prop	erty		Date	Value of the
		DI 0 E:						03/2016	property \$0
		PLS Financial Se Creditor's Name	rvices, Inc.					03/2010	
		One South Wacke	er Drive, 36th Floor		Explain what happ	pened			
			on Compared Coursel		Property was re	epossessed.			
		Aun: Gillan Mads	sen - Corporate Counsel		Property was fo	•			
		Chicago	Illinois 60606		Property was g		and a faul		
		City	State Zip Code	e	Describe the prop	ttached, seized,	or ieviea.	Date	Value of the
									property
		Croditor's Namo							
		Creditor's Name			Explain what happ	pened			
		Number Street							
					Property was re				
					Property was g				
		City	State Zin Code	<u> </u>		ttached seized	or levied		

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Debto	r 1	Kimberly First Name	L Middle Name	Johnson Last Name	Case number (if known)		
		hin 90 days before you filed to ounts or refuse to make a pay			ank or financial institution, s	et off any amou	nts from your
]	<b>✓</b>	No Yes. Fill in the details.					
				Describe the action the	e creditor took	Date action was taken	Amount
		Creditor's Name					
		Number Street		Last 4 digits of account n	umber: XXXX-		
		City State	Zip Code				
		hin 1 year before you filed for ointed receiver, a custodian,		of your property in the p	oossession of an assignee f	or the benefit of	creditors, a court-
<u>[</u>	<b>✓</b>	No Yes					
Part 5		List Certain Gifts and (					
13.	Wi	thin 2 years before you filed  No	for bankruptcy, did yc	ou give any gifts with a to	otal value of more than \$600	per person?	
		Yes. Fill in the details for each					
		Gifts with a total value of m per person	ore than \$600	Describe the gifts		Dates you gave the gifts	Value
		Person to Whom You Gave the	e Gift				
		Number Street					
		City State Person's relationship to you	Zip Code				
		Person to Whom You Gave the	e Gift				
		Number Street					
		City State Person's relationship to you	Zip Code				

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Deb	tor 1	Kimberly First Name	L Middle Name	Johnson Last Name	Case number (if known)		
11	\ <b>\</b> /i+	hin 2 years before you filed f	ior bankruptov did vo	uu aivo any aifte or contrib	outions with a total value of	more than \$600 t	o any charity?
14.	VIII	No	or bankruptcy, did yc	ou give any gins or continu	outions with a total value of	more man \$600 t	o any chanty?
	H	Yes. Fill in the details for each	gift or contribution.				
		Gifts or contributions to cl	harities	Describe what you cont	ributed	Date you	Value
		that total more than \$600				contributed	
		Charity's Name					
		Number Street					
		Number Street					
		City State	Zip Code				
Part	6:	List Certain Losses					
15.		nin 1 year before you filed fo	r bankruptcy or since	you filed for bankruptcy,	did you lose anything beca	use of theft, fire,	other disaster, or
	gam	nbling?					
	씜	No Yes. Fill in the details.					
		Describe the property you	lost and	Describe any insurance		Date of your	Value of property
		how the loss occurred		Include the amount that in pending insurance claims		loss	lost
				A/B: Property.			
Part	7:	List Certain Payments	or Transfers				
10.	abo	nin 1 year before you filed fo ut seeking bankruptcy or pro ide any attorneys, bankruptcy p No Yes. Fill in the details.	eparing a bankruptcy	petition? edit counseling agencies for	services required in your bank	ruptcy.	
				Description and value of transferred	any property	Date payment or transfer was made	Amount of payment
		Person Who Was Paid					
		Number Street					
		City State	Zip Code				
			2ip 00dc				
		Email or website address					
		Person Who Made the Payme	ent, if Not You				
		Person Who Was Paid					
		Number Street					
		City State	Zip Code				
		Email or website address					
		Person Who Made the Payme	ent, if Not You				

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Deb	tor 1	Kimberly	L	Johnson	Case number (if known)		
		First Name	Middle Name	Last Name			
17.	help	hin 1 year before you filed for you deal with your creditors not include any payment or trans  No  Yes. Fill in the details.	s or to make payments		ehalf pay or transfer a	any property to any	one who promised to
	ш	res. Fill in the details.					
				Description and value of any partransferred	property	Date payment or transfer was made	Amount of payment
		Person Who Was Paid					
		Number Street					
		City State	Zip Code				
		City State	Zip Code				
		ude both outright transfers and sfers that you have already liste  No  Yes. Fill in the details.		rity (such as the granting of a secu			
				Description and value of any property transferred	Describe any payments re in exchange	property or ceived or debts pa	Date transfer was made
		Person Who Received Transf	fer				
		Number Street					
		City State Person's relationship to you	Zip Code				
		Person Who Received Transf	fer				
		Number Street					
		City State Person's relationship to you	Zip Code				
19.		hin 10 years before you filed ese are often called asset-prote		ou transfer any property to a self	f-settled trust or simila	ar device of which	you are a beneficiary?
	<b>Y</b>	No Voc Fill in the details					
	Ц	Yes. Fill in the details.		Description and value of the	property transferred		Date transfer was made
		Name of trust					

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Debt	or 1	Kimberly I First Name	- Middle Name	Johnson Last Name	Case number (if known)		
Dont	0-	List Certain Financial Acc			ree and Starges Units		
	With	hin 1 year before you filed for ba				or your benefit, clo	sed, sold,
		de checking, savings, money mark peratives, associations, and other fi			t; shares in banks, credit unions, b	orokerage houses, p	ension funds,
		No Yes. Fill in the details.		Local A. Modern of account	<b>T</b>	Dete	Lasthalana
				Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
		Person Who Was Paid		XXXX-	☐ Checking ☐ Savings	<del></del> -	
		Number Street			Money market Brokerage Other		
		City State	Zip Code	XXXX-	Checking		
		Person Who Was Paid		<b>***</b>	Savings		
		Number Street			Money market Brokerage		
					Other		
		City State	Zip Code				
21.		you now have, or did you have wer valuables?	vithin 1 year befor	e you filed for bankruptcy, an	/ safe deposit box or other dep	ository for securit	ies, cash, or
	씜	No Yes. Fill in the details.					
			W	ho else had access to it?	Describe the conte	nts	Do you still have it?
		Name of Financial Institution	Na	ame			☐ No ☐ Yes
		Number Street		ımber Street			
			Ci	ty State Zip 0	Code		
00		-	ip Code				
22.	_	e you stored property in a storag	ge unit or place o	ther than your home within 1	year before you filed for bankri	iptcy?	
		Yes. Fill in the details.					
			W	ho else had access to it?	Describe the conte	nts	Do you still have it?
		Name of Storage Facility	Na	ame			☐ No ☐ Yes
		Number Street	Nu	ımber Street			☐ 163
		City State Z	Ci (ip Code	ty State Zip (	Code		
		Oity State Z	ip code				

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	1 Kimberly L	Johnson	Case number (if known)	
	First Name Middle Name	Last Name		
rt 9:	<b>Identify Property You Hold or Con</b>	trol for Someone Else		
, D.	a you hald ar control any property that come	sono oloo owno? Inoludo ony prop	porty you berrowed from are storing for or hold	in truct for
	o you note or control any property that some precions.	eone eise owns? include any prop	erty you borrowed from, are storing for, or hold	in trust for
_	7 N.			
Ľ	No			
_	Yes. Fill in the details.	Where is the manager.	Describe the contents	Value
		Where is the property?	Describe the contents	Value
	Owner's Name	Number Street		
	Number Street			
		City State Zip	p Code	
	City State Zip Code	•		
	Cive Details About Environments	l Information		
art 10	Give Details About Environmenta	ı iiiiOlillatiOli		
or the	purpose of Part 10, the following definitions app	y:		
•	Environmental law means any federal, state, or	ocal statute or regulation concerning	pollution, contamination, releases of	
	hazardous or toxic substances, wastes, or mate			
	including statutes or regulations controlling the	cleanup of these substances, wastes,	, or material.	
•	Site means any location, facility, or property as de	efined under any environmental law, w	hether you now own, operate, or utilize it	
	or used to own, operate, or utilize it, including di	sposal sites.		
_	Hazardous material means anything an environn	nental law defines as a hazardous was		
-	nazaracac matemar meane anyuming an environ	ici ilai iaw uciii ics as a i iazai uous was	ste, hazardous substance,	
-	toxic substance, hazardous material, pollutant, c		ste, hazardous substance,	
	toxic substance, hazardous material, pollutant, c	ontaminant, or similar term.		
		ontaminant, or similar term.		
eport	toxic substance, hazardous material, pollutant, of all notices, releases, and proceedings that you k	ontaminant, or similar term. now about, regardless of when they o		?
eport	toxic substance, hazardous material, pollutant, of all notices, releases, and proceedings that you keep as any governmental unit notified you that you	ontaminant, or similar term. now about, regardless of when they o	occurred.	?
eport	toxic substance, hazardous material, pollutant, or all notices, releases, and proceedings that you keep as any governmental unit notified you that you have also also also also also also also also	ontaminant, or similar term. now about, regardless of when they o	occurred.	?
eport	toxic substance, hazardous material, pollutant, of all notices, releases, and proceedings that you keep as any governmental unit notified you that you	ontaminant, or similar term.  now about, regardless of when they o  ou may be liable or potentially liab	occurred. ole under or in violation of an environmental law	
eport	toxic substance, hazardous material, pollutant, or all notices, releases, and proceedings that you keep as any governmental unit notified you that you have also also also also also also also also	ontaminant, or similar term. now about, regardless of when they o	occurred.	?  Date of notice
eport	toxic substance, hazardous material, pollutant, or all notices, releases, and proceedings that you keep as any governmental unit notified you that you have also also also also also also also also	ontaminant, or similar term.  now about, regardless of when they o  ou may be liable or potentially liab	occurred. ole under or in violation of an environmental law	Date of
eport	toxic substance, hazardous material, pollutant, or all notices, releases, and proceedings that you keep as any governmental unit notified you that you have also also also also also also also also	ontaminant, or similar term.  now about, regardless of when they o  ou may be liable or potentially liab	occurred. ole under or in violation of an environmental law	Date of
eport	toxic substance, hazardous material, pollutant, or all notices, releases, and proceedings that you keep as any governmental unit notified you that you have as any governmental unit notified you that you have as any governmental unit notified you that you have a hazardous material, pollutant, or all notices, releases, and proceedings that you have any governmental unit notified you that you have a hazardous material, pollutant, or all notices, releases, and proceedings that you have a hazardous material, pollutant, or all notices, releases, and proceedings that you have a hazardous material, pollutant, or all notices, releases, and proceedings that you have a hazardous material, pollutant, or all notices, releases, and proceedings that you have a hazardous material, pollutant, or all notices, releases, and proceedings that you have a hazardous material, pollutant, or all notices, releases, and proceedings that you have a hazardous material hazardous materials.	ontaminant, or similar term.  now about, regardless of when they o  ou may be liable or potentially liab  Governmental unit	occurred. ole under or in violation of an environmental law	Date of
eport	toxic substance, hazardous material, pollutant, or all notices, releases, and proceedings that you keep as any governmental unit notified you that you have as any governmental unit notified you that you have a hard some and have a hard some and have a hard some and ha	ontaminant, or similar term.  now about, regardless of when they o  ou may be liable or potentially liab  Governmental unit	occurred. ole under or in violation of an environmental law	Date of
eport	toxic substance, hazardous material, pollutant, or all notices, releases, and proceedings that you keep as any governmental unit notified you that you have as any governmental unit notified you that you have as any governmental unit notified you that you have a hazardous material, pollutant, or all notices, releases, and proceedings that you have any governmental unit notified you that you have a hazardous material, pollutant, or all notices, releases, and proceedings that you have a hazardous material, pollutant, or all notices, releases, and proceedings that you have a hazardous material, pollutant, or all notices, releases, and proceedings that you have a hazardous material, pollutant, or all notices, releases, and proceedings that you have a hazardous material, pollutant, or all notices, releases, and proceedings that you have a hazardous material, pollutant, or all notices, releases, and proceedings that you have a hazardous material hazardous materials.	ontaminant, or similar term.  now about, regardless of when they or  ou may be liable or potentially liab  Governmental unit  Governmental unit  Number Street	Environmental law, if you know it	Date of
eport	toxic substance, hazardous material, pollutant, or all notices, releases, and proceedings that you keep as any governmental unit notified you that you have as any governmental unit notified you that you have as any governmental unit notified you that you have as any governmental unit notified you that you have a have a have a hard and	ontaminant, or similar term.  now about, regardless of when they or  ou may be liable or potentially liab  Governmental unit  Governmental unit  Number Street	occurred. ole under or in violation of an environmental law	Date of
eport	toxic substance, hazardous material, pollutant, or all notices, releases, and proceedings that you keep as any governmental unit notified you that you have as any governmental unit notified you that you have as any governmental unit notified you that you have a hazardous material, pollutant, or all notices, releases, and proceedings that you have any governmental unit notified you that you have a hazardous material, pollutant, or all notices, releases, and proceedings that you have a hazardous material, pollutant, or all notices, releases, and proceedings that you have a hazardous material, pollutant, or all notices, releases, and proceedings that you have a hazardous material, pollutant, or all notices, releases, and proceedings that you have a hazardous material, pollutant, or all notices, releases, and proceedings that you have a hazardous material, pollutant, or all notices, releases, and proceedings that you have a hazardous material hazardous materials.	ontaminant, or similar term.  now about, regardless of when they or  ou may be liable or potentially liab  Governmental unit  Governmental unit  Number Street	Environmental law, if you know it	Date of
eport	toxic substance, hazardous material, pollutant, or all notices, releases, and proceedings that you keep as any governmental unit notified you that you have as any governmental unit notified you that you have yo	ontaminant, or similar term.  now about, regardless of when they of the policy of the	Environmental law, if you know it	Date of
eport	toxic substance, hazardous material, pollutant, or all notices, releases, and proceedings that you keep as any governmental unit notified you that you have you. Yes. Fill in the details.  Name of site  Number Street  City State Zip Code  ave you notified any governmental unit of and	ontaminant, or similar term.  now about, regardless of when they of the policy of the	Environmental law, if you know it	Date of
eport	toxic substance, hazardous material, pollutant, or all notices, releases, and proceedings that you keep as any governmental unit notified you that you have you. Yes. Fill in the details.  Name of site  Number Street  City State Zip Code  ave you notified any governmental unit of any notified an	ontaminant, or similar term.  now about, regardless of when they of the policy of the	Environmental law, if you know it	Date of
eport	toxic substance, hazardous material, pollutant, or all notices, releases, and proceedings that you keep as any governmental unit notified you that you have you. Yes. Fill in the details.  Name of site  Number Street  City State Zip Code  ave you notified any governmental unit of and	ontaminant, or similar term.  now about, regardless of when they of the policy of the	Environmental law, if you know it	Date of
eport	toxic substance, hazardous material, pollutant, or all notices, releases, and proceedings that you keep as any governmental unit notified you that you have you. Yes. Fill in the details.  Name of site  Number Street  City State Zip Code  ave you notified any governmental unit of any notified an	ontaminant, or similar term.  now about, regardless of when they of the policy of the	Environmental law, if you know it	Date of notice
eport	toxic substance, hazardous material, pollutant, or all notices, releases, and proceedings that you keep as any governmental unit notified you that you have you. Yes. Fill in the details.  Name of site  Number Street  City State Zip Code  ave you notified any governmental unit of any notified an	ontaminant, or similar term.  now about, regardless of when they or  ou may be liable or potentially liable  Governmental unit  Governmental unit  Number Street  City State Zigny release of hazardous material?	Environmental law, if you know it	Date of notice
eport	toxic substance, hazardous material, pollutant, or all notices, releases, and proceedings that you keep as any governmental unit notified you that you have you. No Yes. Fill in the details.  Name of site  Number Street  City State Zip Code  ave you notified any governmental unit of any yes. Fill in the details.	ontaminant, or similar term.  now about, regardless of when they of the pour may be liable or potentially liable.  Governmental unit  Governmental unit  Number Street  City State Zigny release of hazardous material?  Governmental unit	Environmental law, if you know it	Date of notice
eport	toxic substance, hazardous material, pollutant, or all notices, releases, and proceedings that you keep as any governmental unit notified you that you have you. Yes. Fill in the details.  Name of site  Number Street  City State Zip Code  ave you notified any governmental unit of any notified an	ontaminant, or similar term.  now about, regardless of when they or  ou may be liable or potentially liable  Governmental unit  Governmental unit  Number Street  City State Zigny release of hazardous material?	Environmental law, if you know it	Date of notice
eport	toxic substance, hazardous material, pollutant, or all notices, releases, and proceedings that you keep as any governmental unit notified you that you have you. No Yes. Fill in the details.  Name of site  Number Street  City State Zip Code  ave you notified any governmental unit of any yes. Fill in the details.	ontaminant, or similar term.  now about, regardless of when they of the pour may be liable or potentially liable.  Governmental unit  Governmental unit  Number Street  City State Zigny release of hazardous material?  Governmental unit	Environmental law, if you know it	Date of notice
eport	toxic substance, hazardous material, pollutant, or all notices, releases, and proceedings that you keep as any governmental unit notified you that you have yes. Fill in the details.  No Name of site Number Street  City State Zip Code  ave you notified any governmental unit of any yes. Fill in the details.  No Yes. Fill in the details.	ontaminant, or similar term.  now about, regardless of when they of the pour may be liable or potentially liable.  Governmental unit  Number Street  City State Zipper y release of hazardous material?  Governmental unit  Governmental unit  Number Street	Environmental law, if you know it  Environmental law, if you know it  Environmental law, if you know it	Date of notice
eport	toxic substance, hazardous material, pollutant, or all notices, releases, and proceedings that you keep as any governmental unit notified you that you have yes. Fill in the details.  No Name of site Number Street  City State Zip Code  ave you notified any governmental unit of any yes. Fill in the details.  No Yes. Fill in the details.	ontaminant, or similar term.  now about, regardless of when they of the pour may be liable or potentially liable.  Governmental unit  Number Street  City State Zipper y release of hazardous material?  Governmental unit  Governmental unit  Number Street	Environmental law, if you know it	Date of notice
eport	toxic substance, hazardous material, pollutant, or all notices, releases, and proceedings that you keep as any governmental unit notified you that you have yes. Fill in the details.  No Name of site Number Street  City State Zip Code  ave you notified any governmental unit of any yes. Fill in the details.  No Yes. Fill in the details.	ontaminant, or similar term.  now about, regardless of when they of the pour may be liable or potentially liable.  Governmental unit  Number Street  City State Zipper y release of hazardous material?  Governmental unit  Governmental unit  Number Street	Environmental law, if you know it  Environmental law, if you know it  Environmental law, if you know it	Date of notice

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Deb	tor 1	Kimberly		L	Johnson	Case	number (if known)	
		First Name		Middle Name	Last Name			
00	Harri				-ti		-1	_
26.	Hav	e you been a party	in any judio	cial or administra	ative proceeding under	any environment	al law? Include settlements and order	S.
	<b>V</b>	No						
	П	Yes. Fill in the deta	ils.					
	ш				Court or agency		Nature of the case	Status of the
					Court or agency		Nature of the case	case
		Cooo titlo						case
		Case title						Pending
					Court Name			
								On appeal
		Case number			Number Street			Concluded
								Concluded
					City State	Zip Code		
		1						
Part	111:	Give Details A	bout Your	Business or	Connections to Ar	y Business		
27.	Witl	nin 4 years before	you filed for	bankruptcy, did	l you own a business or	have any of the f	ollowing connections to any business	<b>s</b> ?
		A sole propriet	or or salf-am	ployed in a trade	profession, or other activit	v either full-time o	r part-time	
				-			r part-time	
				ity company (LLC	) or limited liability partner	ship (LLP)		
		A partner in a	partnership					
		An officer, dire	ctor, or mana	iging executive of	a corporation			
		An owner of at	t least 5% of t	he voting or equit	y securities of a corporation	n		
	_	_		- ,	, ,			
	✓	No. None of the abo						
		Yes. Check all that	apply above a	and fill in the detail	ls below for each business			
					Describe the natu	re of the busines	ss Employer Identification n	umber Do not
							include Social Security no	
							EIN!-	
		Business Name					EIN:	
		Number Street			_		Dates business existed	
					Name of account	ant or bookkeepe	er	
		City	Ctoto	Zin Codo			From To	
		City	State	Zip Code				
					Describe the natu	re of the busines	ss Employer Identification n	umber Do not
							include Social Security no	
							FINI.	
		Business Name			_		EIN:	
		Number Street			_		Dates business existed	
		Number Street			Name of account	ant or bookkeepe	er	
		<u></u>	<u> </u>		_		From To	
		City	State	Zip Code			11011110	
					Deceribe the net	una af tha husinas	- Employer Identification n	umber De net
					Describe the natu	ire of the busines	Employer Identification n include Social Security no	
							include Social Security III	umber of Hills.
		Dunia N			_		EIN:	
		Business Name						
					_		Dotos husiness suistad	
		Number Street			Name of cooking	ant or bookkoos	Dates business existed	
					Name of account	ангог рооккеере		
		City	State	Zip Code			From To	
		•	-	,				

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Debtor '		L	Johnson	Case number (if known)
	First Name	Middle Name	Last Name	
	ithin 2 years before yeeditors, or other parti		id you give a financial statemer	nt to anyone about your business? Include all financial institutions,
	Yes. Fill in the details	below.		
	-		Date issued	
	-			
	Name		MM/DD/YYYY	
	Number Street		<del></del>	
	City	State Zip Code		
Part 12	Sign Below			
true	e and correct. I unders kruptcy case can resi	stand that making a false	statement, concealing propert	nts, and I declare under penalty of perjury that the answers are y, or obtaining money or property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
		e of Debtor 1		Signature of Debtor 2
	Date 9/	/13/2016		Date
Did			nt of Financial Affairs for Individ	duals Filing for Bankruptcy (Official Form 107)?
Did	you pay or agree to p	pay someone who is not a	in attorney to help you fill out b	ankruptcy forms?
✓	No			
	Yes. Name of person			Attach the Bankruptcy Petition Preparer's Notice,

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Fill in this information to identify your case:					
Debtor 1	Kimberly	L	Johnson	_	
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filir	ng) First Name	Middle Name	Last Name	_	
United States	Bankruptcy Court for the:	Northern	District of Illinois	_	
Case number (If known)			(State)	-	

Check if this is an amended filing

### Official Form 108

### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### List Your Creditors Who Have Secured Claims For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Identify the creditor and the property that is collateral What do you intend to do with the property that Did you claim the property as exempt on Schedule C? secures a debt? Surrender the property. No. Creditor's name: Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: No. Surrender the property. Creditor's name: Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: Creditor's Surrender the property. No. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: No. Creditor's Surrender the property. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]:

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Debto	r Kimberly	L	Johnson	Case number (if
1	First Name	Middle Name	Last Name	known)
				Part 2:
		nal Property Leases		
inform	ation below. Do not list r		leases are leases that are	Contracts and Unexpired Leases (Official Form 106G), fill in the e still in effect; the lease period has not yet ended. You may assume 365(p)(2).
De	escribe your unexpired p	ersonal property leases		Will the lease be assumed?
Le	ssor's name:			□ No □ Yes
	escription of leased operty:			
Le	ssor's name:			No Yes
	escription of leased operty:			
Le	ssor's name:			□ No □ Yes
	escription of leased operty:			
Le	ssor's name:			□ No □ Yes
	escription of leased operty:			
Le	ssor's name:			□ No □ Yes
	escription of leased operty:			
Le	ssor's name:			☐ No ☐ Yes
	escription of leased operty:			
Le	ssor's name:			☐ No ☐ Yes
	escription of leased operty:			
Part 3:	Sign Below			
Und			my intention about any pr	roperty of my estate that secures a debt and any personal
اه.م	, 10 0aa,000 10 a			
	/s/ Kimberly Johnson		_	
5	Signature of Debtor 1		Sign	nature of Debtor 1
[	Date <b>9/13/2016</b>		Date	e
_	MM/DD/YYYY		24.	MM/DD/YYYY

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

### **Chapter 7: Liquidation**

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes:
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft:
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form — the Chapter 7 Means Test Calculation (Official Form 122A–2). The calculations on the form— sometimes called the Means Test —deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

+	 total fee
+	 administrative fee
	filing fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total foo

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

## Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

## Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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### **UNITED STATES BANKRUPTCY COURT**

### **Northern District of Illinois**

In re	Kimberly L Johnson		Case No.		
_	Debtor			(If known)	
			Chapter	Chapter 7	
	DISCLOSURE OF	COMPENSATIO	N OF ATTORNEY FO	OR DEBTOR	
1.	Pursuant to 11 U.S.C. § 329(a) and that compensation paid to me withis services rendered or to be rendered is as follows:	in one year before the filin	ng of the petition in bankruptcy, or a	agreed to be paid to me, for	
	For legal services, I have agreed to	o accept		\$1,350.00	
	Prior to the filing of this statement	I have received		\$0.00	
	Balance Due			\$1,350.00	
2.	The source of the compensation pa	aid to me was:		<del>_</del>	
	<b>✓</b> Debtor	Other (speci	ify)		
3.	The source of the compensation pa	aid to me is:			
	Debtor	Other (speci	ify)		
4.	I have not agreed to share the members and associates of m	above-disclosed compens ny law firm.	sation with any other person unless	s they are	
		law firm. A copy of the ag	on with a other person or persons w greement, together with a list of the		
5.	In return for the above-disclosed for a. Analysis of the debtor's fina bankruptcy;		er legal service for all aspects of th ring advice to the debtor in determi		
	b. Preparation and filing of an	y petition, schedules, stat	ements of affairs and plan which m	nay be required;	
	c. Representation of the debto	or at the meeting of creditc	ors and confirmation hearing, and a	ny adjourned hearings thereof;	
6.	By agreement with the debtor(s), the	he above-disclosed fee do	pes not include the following service	es:	
		CERTIFIC	CATION		
	I certify that the foregoing is a comp he debtor(s) in this bankruptcy proce		eement or arrangement for payme	nt to me for representation	
	9/13/2016		/s/ Mike Miller		
	Date		Signature of Attorney		
			Semrad Law Firm		
			Name of law firm		

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### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

In re:	Johnson, Kimberly L	Case No.		
	Debtor(s)	0000 100		
		Chapter.	Chapter7	
	VERIFICATIO	ON OF CREDITOR MA	TRIX	
	The above named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowled			
<b>5</b> -4	0/40/0040	(a) Jahanna (G	anh and a l	
Date:	9/13/2016	/s/ Johnson, Kii		
		Johnson, Kimb Signature of De	•	

PEOPLES ENGY 200 EAST RANDOLPH CHICAGO , IL 60601 USA

CENTCREDSERV PO BOX 7230 OVERLAND PARK , KS 66207 USA

COMMONWEALTH FINANCIAL 245 Main St Scranton , PA 18519 USA

MBB 1550 N NORTWEST HWY STE 403 PARK RIDGE , IL 60068 USA

ComEd 3 Lincoln Center Bankruptcy Section Oakbrook Terrace , IL 60181 USA

Chase Bank 340 S. Cleveland Bldg 370 OH1-1073 Westerville , OH 43081 USA

Chexsystems 7805 Hudson Rd # 100 Woodbury , MN 55125 USA

US Bank 425 Walnut Street Cincinnati , OH 45202 USA

Crandon Emergency Physicians 8012 S Crandon Ave Chicago , IL 60617 USA

Dish Network 9601 S Meridian Blvd Englewood , CO 80112 USA

Comcast 11621 E. Marginal Way # 5 Bankruptcy Dept Seattle , WA 98168 USA

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Chicago , IL 60611 USA